

CERTIFICATE OF VETERINARY INSPECTION
 Livestock and Poultry

Valid for 30 days following the date of inspection of the animal(s) identified on the document.

Number
 522534

Inspection Date July 25 2019
 Issue Date July 25 2019
 Shipment Date July 30 2019
 ENTRY PERMIT NUMBER

RECEIVER
Private Export
 OTHER NAME AND ADDRESS
 AIR TRUCK

SHIPPER
Madre S. 1 route
 ADDRESS (MAILING)
9907 Marguete St
 CITY, STATE, ZIP
Madre S. 1 route

NAME
Madre S. 1 route
 ADDRESS (MAILING)
9907 Marguete St
 CITY, STATE, ZIP
Madre S. 1 route

SPECIES
 Cattle
 Horses
 Sheep
 Swine
 Poultry
 Other (indicate) Zebras

PURPOSE(S) OF SHIPMENT
 Interstate
 Intrastate
 Show
 Sale
 Ownership change
 Other (indicate) Exportations

STATE/AREA STATUS
 Tuberculosis
 Free
 Modified
 Accredited
 Brucellosis
 Free
 'A'
 'B'
 Other Status (indicate)

HERD/FLOCK STATUS
 Accredited
 Certified
 Validated

QUALIFIED NEGATIVE HERD TEST DATES
 A. _____ B. _____ C. _____

BRUCELLOSIS TEST CHARTS—Legible copies of official charts with individual animals identified and animals not shipped lined out are attached to both pink and white copies?
 Yes No

TEST CHART NUMBERS:

VACCINATED OR TREATED FOR: (except brucellosis)
 Disease _____ Date _____

Product(s) _____

FEDERAL EAR TAG #, OR OTHER PERMANENT IDENTIFICATION	L I N E #	REGISTRY NAME AND NUMBER OR DESCRIPTION AND REGISTERED OWNERSHIP BRAND (All animals presented for test must be listed. Line out animals not shipped.)	BRUCELLOSIS TEST				TUBERCULOSIS TEST				OTHER TEST(S)					
			DATE OF TEST LABORATORY	BAPA RST	CARD SPT	RIV	TEST IN- TEMP.	DATE HOUR	LAB	DATE	LAB	DATE	RESULT			
	1	5 Camels - Vaccinated with CD-1	Vaccination													
	2															
	3	11 Horses - 11 horses } vac with ET 7/3 POUF	TATTOO													
	4	2 sheep - 2 sheep } vac with ET 7/3 POUF	Symbol													
	5	Horses Dankeys 4 Zebra														
	6	Pigs -														
	7															
	8															
	9															
	10	Assorted Ducks Rabbits														
	11	PARENTS TORTISES														
	12	Doves														
	13															
	14															
	15	ATLANTA Home Animals & Pet Care - Disease Free														

VETERINARY CERTIFICATION—I certify, as an accredited veterinarian that the above described animals have been inspected by me and that they are not showing signs of infectious, contagious and/or communicable disease (except where noted). The vaccinations and results of tests are indicated on the certificate. To the best of my knowledge, the animals filled on this certificate meet the state of destination and federal interstate requirements. No further warranty is made or implied.

STATE OF DESTINATION REQUIREMENTS:
Vaccination Records, Visitation

OWNER/AGENT STATEMENT (Where applicable)
 "The animals in this shipment are those certified to and listed on this certificate."
 S/ _____ Date _____

DISTRIBUTION:
 WHITE AND YELLOW—Mail to Animal Health & Food Safety Services; SACRAMENTO;
 PINK—Accompany Shipment;
 GOLDENROD—Veterinarian Copy

ORIGIN STATE CERTIFICATION

SIGNATURE [Signature] ACCREDITED VETERINARIAN
PRINT NAME Rubene Day LICENSE # 246
ADDRESS 1122 PHONE 1800 242-1328
San Valerius La 91353