		AV .00% 0	A. 208584-4-				Sec. 200				
Minnesota Board of Animal Health 625 Robert St. North	MINNESOT	A CE	RTIF	ICAT Revis	ATE OF VET	MINNESOTA CERTIFICATE OF VETERINARY INSPECTION Revised October 2009	Ž	41- 1/	41- 1444093	93	
1. Owner/Consignor's Name:				5. Con	5. Consignee's Name:	Name:		10. Nu	10. Number in Shipment:	pment:	
X 30 1 617				0	Puppu	Love			05		
2	11 10 11			6. Con		5		11. Per	mit Numbe	11. Permit Number: (if required by state of destination)	estination)
20415 HOLE	St NIMINS	35	9	23	000	BIVER RD. MA	MANORYIK	NIK			
S: (i	ove) / Tw	1260		7. Des	tination:	~	546		12. Herd or Flock Status:	Status:	
								Disease:	0.		
4. Species: Cattle Horse	Movemen			,		9. Carrier's Name and Address:		Status:			
Swine Cat	□ Breeding □ Slaughter □ Sale □ Show/Exh	☐ Slaughter ☐ Show/Exhibition	ition	□ Feeding	eding	Allan BALCK		Status	Status/Herd/Flock Number:	Number:	
n ocar n olicab	Travel					A Truck DAir DCar D.		Date of	Date of last herd test:	sst:	
Official Earths Tottoo or	Description of Animal or Begister				osis	Tuberculosis		Other Test		Other Vaccine or Treatment	eatment
Other Permanent ID	Name and Number	Age	Sex	Breed	Brucelle Vacc.	Date injected Date Read Results	Tested for	Date	Results	Product	Date
183932 933,937,938	HARVEST T	8	13/1	一一一		•					
3959 960 96	GOIDEN BET.	R	394	3							
3 83962 962, 973	9010eN net.	00	3	12							
5	GO DEN RET.	ox	2 F								
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15 14											
Certificate of Issuing Veterinarian: I certify as an accredited veterinarian that the 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 vaccination and results of tests are as indicated on the certificate. To the	as an accredited veterinarian that the nicable disease (except where noted).	described The vac	animals cination	have be and resul	en inspecte ts of tests a	y me and that they are not showing s indicated on the certificate. To the	ertificate of Animals in	Certificate of Owner/Agent: Animals in this shipment ar	it: are those ce	Certificate of Owner/Agent: Animals in this shipment are those certified to and listed on this certificate.	pertificate.
best of thy knowledge, the difficial listed of this centificate free fire state of destination and reversities are reversities.	us centilicate titleet nie state of results	and and	0000	incipaci	dending	to making to made of milproce.	I hereby o	ertify that the	animal(s) in the	☐ I hereby certify that the animal(s) in this shipment is (are), to the best of my knowledge acclimated to air temporalities hower than 7.2°C (45° E)	best of my
Accredited Veterinarian Signature	ancura					9/25/0 # # # # # # # # # # # # # # # # # # #	Owner/Ag	Owner/Agent Signature	DO)	Owner/Agent Signature	,
Address No. 10 10 10	stanly a	200	13	25	Ω		Printed Name	me	2/3		
3				Date I	78	Date Issued	Phone	10 6	1	Date of Owner Signature	re
15 00167-8 14 -1 //	White - with shipment	Blue an	d Pink	- copy to	Board of	Blue and Pink - copy to Board of Animal Health Yellow - Issui	ng veterin	erinarian		118/11	
		Bille an	O PINK	- copy to	DOBLO OF	Animai mealth reliow - issuing veterinarian	III AFIELIII	dildil			