U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NM-007

TIME HORSES LOADED ON CONVEYANCE: 1:00pm

DATE: 2/28/10

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE: Los Lunas, New Mexico

VEHICLE LICENSE NO. AND DRIVER'S NAME: JJJ Trucking- [redacted] (b)(6)

NAME OF AUCTION/MARKET: Southwest Livestock

CONSIGNOR (OWNER/SHIPPER) NAME: Dennis Chavez

CONSIGNEE (RECEIVER/DESTINATION) NAME: [redacted] (b)(6)

STREET ADDRESS: 24 Dalias Rd

STREET ADDRESS: Carnicas de Jerez

CITY, STATE, ZIP CODE: Los Lunas, NM 87031

CITY, STATE, ZIP CODE: Jerez, Zacatecas MX.

AREA CODE & TELEPHONE NO.: 505-865-4600

AREA CODE & TELEPHONE NO.: 915-252-6614

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- [x] Pregnant mares are not likely to foal (give birth) during the trip.
- [x] Horses are able to bear weight on all 4 limbs.
- [x] Foals are older than 6 months of age.
- [x] Horses are not blind in both eyes.
- [x] Horses are able to walk unassisted.

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USFH	7801		/						/						/	477263	
2		02				/				/				/			461385	
3		03		/						/				/			482132	
4		04	/							/				/			596041	
5		05	/							/				/			513019	
6		06						SR		/				/			488559	
7		07						SR		/						/	463102	
8		08						dun		/				/			447818	
9		09	/							/						/	545174	
10		10						SR		/						/	545019	
11		11						SR		/						/	4609164	
12		12						SR		/						/	564302	
13		13				/				/				/			458346	
14		14		/						/				/			478564	
15		15		/						/				/			460908	

HORSES H[redacted]INIMUM OF 6 CONSECUTIVE HOURS IM

SIGNATUR[redacted] (b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

I HEREBY [redacted]AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the bes[redacted] (b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

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10-NM-007

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			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	78116						SR		/				/			545816	
17		17	/							/				/			554042	
18		18	/							/				/			545533	
19		19	/							/				/			561994	
20		20						SR		/				/			479223	
21		21			/					/				/			4610666	
22		22			/					/				/			5631058	
23		23						SR		/				/			452740	
24		24						SR		/				/			577307	
25		25	/							/				/			575930	
26		26						SR		/				/			478565	
27		27						SR		/				/			463041	
28		28						SR		/				/			460936	
29		29	/							/				/			479295	
30		30	/							/				/			545112	
31		31	/							/				/			478398	
32		32				/							ML	/			554999	
33		33	/							/						/	562073	
34		34		/						/						/	556432	
35		35	/							/				/			5526061	
36		36		/						/				/			5719666	
37		37		/						/				/			545146	
38		38						SR		/				/			454188	
39		39	/							/				/			489114	
40		40	/							/				/			480831	
41		41	/							/				/			463731	
42		42	/							/						/	476289	
43		43			/					/						/	478894	
44		44		/						/				/			545186	
45		45	/							/				/			597340	

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify tha [redacted] and correct to the best of my knowledge.)

(b)(6)

VS FORM 10-13A
(SEP 2002)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NM-007

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	7846	/							/				/			461626	
17		47		/						/						/	482049	
18		48						SR		/				/			576107	
19		49	/							/						/	482505	
20		50	/							/				/			480560	
21		51		/						/				/			451904	
22		52						SR		/				/			542120	
23		53	/							/				/			453422	
24		54	/							/				/			448709	
25		55						SR		/				/			597280	
26		56	/							/				/			477483	
27		57		/						/						/	575952	
28		58	/							/				/			450321	
29		59		/						/				/			563673	
30		60	/							/				/			481484	
31		61	/							/				/			597804	
32		62			/					/				/			597038	
33		63						SR		/				/			597055	
34		64	/							/				/			422153	
35		65	/								/			/			597493	
36		66						DOA		/				/			477731	
37		67	/							/				/			575622	
38		68				/				/				/			562270	
39		69	/							/				/			476895	
40		70	/							/				/			576860	
41		71						SR		/				/			451405	
42		72	/							/				/			571880	
43		73						SR		/				/			477205	
44		74			/					/						/	449677	
45		75	/							/				/			480807	

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SIGNATURE OF OWNER/SHIPPER([redacted] correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

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FORM APPROVED OMB NO. 0579-0160

ID-MM-07

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16		7876			/					/				/			574116	
17		77		/						/				/			4503666	
18		78	/							/				/			460344	
19		79	/							/						/	563190	
20		80	/							/				/			461089	
21		81				/				/				/			5755886	
22		82		/						/				/			575180	
23		83			/					/				/			451926	
24		84						SR		/				/			574233	
25		85				/				/				/			451733	
26		86	/							/				/			481529	
27		87	/							/				/			562938	
28		88		/						/				/			480992	
29		89		/						/				/			5460062	
30		90						Roan		/				/			482137	
31		91		/						/				/			480794	
32		92						SR		/				/			459307	
33		93				/				/				/			574860	
34		94			/					/				/			477315	
35		95	/							/						/	552832	
36		96			/					/				/			576605	
37		97				/				/						/	450539	
38		98		/						/				/			485729	
39		99		/						/				/			451863	
40																		
41																		
42																		
43																		
44																		
45																		

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SIGNATURE OF OWNER/SHIP [redacted] true and correct to the best of my knowledge.)

(b)(6)

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10-NM-007
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED FROM THE UNITED STATES OF AMERICA TO MEXICO

CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:
   Nombre y Dirección del Exportador:
   Dennis Chavez
   24 Dalies Rd
   Los Lunas, NM 87031
2. Name and Address of Importer:
   Nombre y Dirección del Importador:
   (b)(6)
   Carnicos De Jerez
   Jerez,Zacatecas MX
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
477263	Gelding	6	554042	Mare	6
461263	Mare	5	545533	Mare	7
482132	Mare	5	561944	Mare	4
596041	Mare	5	479223	Mare	7
513019	Mare	7	461066	Mare	6
488559	Mare	4	563658	Mare	4
463102	Gelding	6	452740	Mare	8
447818	Mare	5	577307	Mare	9
545174	Gelding	5	575930	Mare	6
545019	Gelding	7	478565	Mare	7
460964	Gelding	5	463041	Mare	5
564302	Gelding	8	460936	Mare	5
458346	Mare	5	479293	Mare	7
478564	Mare	5	545112	Mare	8
460908	Mare	7	478398	Mare	6
545816	Mare	4	554999	Mare	6

USDA

Veterinary Services

National Center for Import and Export

Health Certificate No. 10-NM-007
(Valid only if the USDA Veterinary Seal Appears over the Certificate Number)

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
562073	Gelding	7	449677	Gelding	7
556432	Gelding	5	480807	Mare	8
552661	Mare	8	574116	Mare	9
571966	Mare	4	450366	Mare	7
545146	Mare	6	460344	Mare	8
454188	Mare	5	563190	Gelding	5
489114	Mare	6	461089	Mare	7
480831	Mare	7	575586	Mare	6
463731	Mare	8	575180	Mare	8
476289	Gelding	5	451926	Mare	6
478894	Gelding	6	574233	Mare	6
545186	Mare	7	451733	Mare	8
597340	Mare	8	481529	Mare	7
461626	Mare	7	562938	Mare	6
482049	Gelding	5	480992	Mare	8
576107	Mare	7	546062	Mare	7
482505	Gelding	8	482137	Mare	6
480560	Mare	7	480794	Mare	7
451904	Mare	6			
542120	Mare	8	459307	Mare	8
453422	Mare	7	574860	Mare	5
448709	Mare	7	477315	Mare	7
597280	Mare	9	552832	Gelding	6
477483	Mare	5	576605	Mare	6
575952	Gelding	8	450539	Gelding	5
450321	Mare	7	485729	Mare	7
563673	Mare	8	451863	Mare	6
481484	Mare	6			
597804	Mare	7			
597038	Mare	8			
597055	Mare	6			
422153	Mare	7			
597493	Mare	6			
477731	Mare	8			
575622	Mare	6			
562270	Mare	7			
476895	Mare	6			
576860	Mare	8			
451405	Mare	5			
571880	Mare	7			
477205	Mare	9			

USDA

VS
Veterinary Services
National Center for
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Health Certificate No. 10-NM-007
(Valid only if the USDA Veterinary Seal
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Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*

CERTIFICATION STATEMENTS / *CERTIFICACIONES*

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / *Fecha de inspección* February 28th 2010

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

USDA

Veterinary Services

National Center for Import and Export

Health Certificate No. 10-NM-007
(Valid only if the USDA Veterinary Seal Appears over the Certificate Number)

(Delete as appropriate /*Remueva lo que no aplique*)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.][.

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*][

C.Y Brasmer
Name of Accredited Veterinarian
Nombre del Médico Veterinario Acreditado

Walter F. Howe
Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario Federal que endosa.

2/28/2010
Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado y Fecha

3/1/10
Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario que endosa y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).*

USDA

Veterinary Services

National Center for Import and Export

Health Certificate No. _____
(Valid only if the USDA Veterinary Seal Appears over the Certificate Number)

AFFIDAVIT
DECLARACIÓN JURADA

I, Dennis Chavez declare that, to my best knowledge horses included in this shipment and accompanied by the health certificate # 10-NM-007 have not been fed or treated within the last one hundred and eighty days (180) prior to shipment with the follo compounds, plants or drugs.

Por este medio declaro que a mi saber y entender los caballos en este embarque, acompañados por el certificado sanitario número 10-NM007 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta (180) días ante del embarque.

1. Aristolochia spp and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (included furazolidone), ronidazol.
   Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incuding furazolidona) y rodinazole.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol and raptopamine.
   Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol y raptopamina.

3. The following thyrosthatics substances were not used: thiouracil, methylthiouracil phenylthiouracil and propylthiouracil.
   Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter [redacted] 2/28/10.
Fecha y firma del exportador

Date and signature of the Notary Public _____ 2/28/10
Fecha y firma del Notario Publico

OFFICIAL SEAL
Joan Chavez
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires: 11/27/11

Mexico, Slaughter horse HC

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

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FORM APPROVED OMB NO. 0579-0160

10-NM-002

TIME HORSES LOADED ON CONVEYANCE: 9:00am

DATE: 1-26-10

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE: Los Lunas, New Mexico

VEHICLE LICENSE NO. AND DRIVER'S NAME: J&J Trucking [redacted]

NAME OF AUCTION/MARKET: Southwest Livestock

CONSIGNOR (OWNER/SHIPPER) NAME: Dennis Chavez

CONSIGNEE (RECEIVER/DESTINATION) NAME: [redacted]

STREET ADDRESS: 24 Dalies Rd

STREET ADDRESS: Carnicos de Jerez

CITY, STATE, ZIP CODE: Los Lunas, nm 87031

CITY, STATE, ZIP CODE: Jerez, Zacatecas, 99380

AREA CODE & TELEPHONE NO.: 505-865-4600

AREA CODE & TELEPHONE NO.: 494-945-2828

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- [x] Pregnant mares are not likely to foal (give birth) during the trip.
- [x] Horses are able to bear weight on all 4 limbs.
- [x] Foals are older than 6 months of age.
- [x] Horses are not blind in both eyes.
- [x] Horses are able to walk unassisted.

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USFH	7001								/						/	985170000458995	
2		02								/						/	448928	
3		03								/				/			458532	
4		04								/						/	545508	
5		05								/				/			456948	
6		06								/				/			448741	
7		07								/				/			456744	
8		08								/				/			575018	
9		09								/				/			458452	
10		10								/						/	457753	
11		11								/						/	517645	
12		12								/				/			451886	
13		13								/				/			458712	
14		14								/				/			513979	
15		15								/						/	340935	

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIAT[redacted]

SIGNATURE [redacted]

I HEREBY AUTHO[redacted]ORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my know[redacted]

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NM-002

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS - Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	7016						bskin		/						/	4516953	
17		17						bskin		/						/	516730	
18		18				/				/						/	451895	
19		19	/							/				/			542322	
20		20						app		/						/	512346	
21		21						bskin		/						/	360155	
22		22						SR		/				/			517879	
23		23	/							/				/			546133	
24		24						SR		/						/	45166662	
25		25						bskin		/						/	454969	
26		26				/				/						/	5765516	
27		27	/							/						/	450677	
28		28	/							/						/	455886	
29		29	/							/						/	574722	
30		30	/							/				/			455412	
31		31						paco		/						/	449033	
32		32		/						/						/	342979	
33		33						SR		/						/	563928	
34		34	/							/						/	453226	
35		35						bskin		/						/	516311	
36		36						bskin		/				/			370123	
37		37		/						/						/	517061	
38		38						paco		/						/	449306	
39		39				/				/						/	462532	
40		40						app		/						/	545459	
41		41	/							/						/	455136	
42		42	/							/				/			457597	
43		43						SR		/						/	512376	
44		44						SR		/						/	453229	
45		45	/							/				/			513432	

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SIGNATURE OWNE [redacted] knowledge.)

(b)(6)

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NM-002

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	70416	/							/				/			456511	
17		47						SR		/						/	450737	
18		48						SR		/				/			452918	
19		49		/						/						/	456387	
20		50				/				/						/	456505	
21		51						b.skin		/				/			453175	
22		52		/						/				/			448119	
23		53				/				/						/	575221	
24		54	/							/				/			458376	
25		55						SR		/				/			457504	
26		56	/							/						/	518069	
27		57						SR		/						/	454902	
28		58						SR		/						/	455302	
29		59						SR		/				/			515797	
30		60						SR		/				/			456002	
31		61	/						/							/	456789	
32		62						SR		/				/			457186	
33		63						b.skin		/						/	562956	
34		64	/							/				/			455632	
35		65	/							/						/	575769	
36		66						Dodo		/				/			577319	
37		67						SR		/				/			574489	
38		68		/						/						/	546056	
39		69						b.skin		/				/			554379	
40		70						SR		/				/			545435	
41		71	/							/						/	563880	
42		72	/							/						/	575527	
43		73						SR		/				/			574054	
44		74						SR		/						/	544771	
45		75	/							/						/	541143	

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SIGNATURE OF OWNER/SHIPPER(I certify tha [redacted] of my knowledge.)

(b)(6)

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0180. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0180

10-NM-002

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS- Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	7076		/						/				/			453853	
17		77	/							/						/	447973	
18		78		/						/				/			577421	
19		79	/							/						/	472071	
20		80	/							/				/			577126	
21		81						SR		/				/			449376	
22		82				/				/				/			453373	
23		83		/						/						/	552469	
24		84						SR		/						/	563060	
25		85	/							/						/	574783	
26		86						QUEN		/						/	545164	
27		87						SR		/						/	541448	
28		88	/							/				/			575039	
29		89	/							/				/			575090	
30		90	/							/				/			545322	
31		91	/							/						/	472406	
32		92						SR		/						/	573955	
33		93						SR		/						/	457629	
34		94	/							/				/			452785	
35		95	/							/				/			457054	
36		96			/					/				/			573025	
37		97						SR		/						/	454243	
38		98			/					/				/			540304	
39		99						SR		/				/			459777	
40		7100		/						/						/	474302	
41		01				/				/						/	562672	
42		02		/						/						/	452679	
43		03			/					/						/	453826	
44		04	/							/						/	545474	
45		05			/					/						/	474535	

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SIGNATURE OF OWNER/SHIPPER(I certify t[redacted]f my knowledge.)

(b)(6)

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NM-002

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	7106						SR		/						/	544933	
17		07				/				/						/	5460446	
18		08						SR		/				/			457486	
19		09						dun		/						/	541584	
20		10	/							/						/	544784	
21		11	/						/							/	5642226	
22		12			/					/						/	463971	
23		13	/							/				/			453607	
24		14						SR		/						/	455491	
25		15				/				/				/			576300	
26		16	/							/						/	455868	
27		17			/					/						/	541481	
28		18				/				/						/	453553	
29		19				/				/				/			474462	
30		20	/							/						/	562721	
31		21	/							/				/			470974	
32		22						SR		/				/			461782	
33		23	/							/						/	5764467	
34		24	/							/						/	544828	
35		25				/				/						/	450316	
36		26	/							/						/	471560	
37		27	/							/						/	572458	
38		28						dun		/						/	515005	
39		29	/							/						/	574235	
40		30			/					/						/	455852	
41		31	/							/						/	513740	
42		32			/					/						/	464304	
43		33	/							/						/	542289	
44		34						SR		/				/			574256	
45		35	/							/			mule			/	571746	

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SIGNATURE OF OWNER/SHIPPER(I certify tha[redacted]f my knowledge.)

[redacted]

(b)(6)

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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APPROVED
OMB NO.
0579-0160

10-NM-002

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	7136	/							/						/	541282	
17		37	/							/						/	517052	
18		38	/							/				/			457813	
19		39		/						/						/	574921	
20		40	/							/						/	473430	
21		41	/							/				/			512897	
22		42			/					/						/	473537	
23		43	/							/						/	573393	
24		44	/							/						/	545089	
25		45			/					/						/	541749	
26		46						SR	/					/			545864	
27		47		/						/						/	472272	
28		48				/				/						/	563447	
29		49						DOA	/							/	448874	
30		50		/						/				/			577119	
31		51		/						/						/	450012	
32		52		/						/				/			451975	
33		53	/							/						/	474799	
34		54			/					/						/	572124	
35		55		/						/				/			475899	
36		56			/					/						/	454535	
37		57						SR		/						/	453889	
38		58			/					/						/	457452	
39		59	/							/				/			456879	
40		60						SR	/					/			455041	
41		61	/							/						/	562314	
42		62						SR		/				/			513876	
43		63	/							/						/	540585	
44		64	/							/						/	470632	
45		65			/					/						/	563131	

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SIGNATURE OF OWNER/SHIPPER(I ce [redacted] my knowledge.)

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OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
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FORM APPROVED OMB NO. 0579-0160

10-NN-002

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYRE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFN	71166	/							/						/	457079	
17		67		/						/						/	473791	
18		68	/							/						/	571215	
19		69		/						/						/	545132	
20		70						SR		/				/			5166884	
21		71						SR		/						/	5162966	
22		72						SR		/				/			475275	
23		73		/						/						/	473679	
24		74	/							/						/	358839	
25		75	/							/				/			471503	
26		76				/				/						/	474281	
27		77						SR		/				/			4758161	
28		78						dwn		/				/			470559	
29		79	/							/				/			4163582	
30		80	/							/						/	476080	
31		81				/				/				/			542025	
32		82	/							/						/	463443	
33		83	/										mule	/			471245	
34		84	/							/				/			460873	
35		85						SR		/				/			3538660	
36		86						bskin		/				/			452072	
37		87						SR		/				/			544935	
38																		
39																		
40																		
41																		
42																		
43																		
44																		
45																		

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SIGNATURE OF OWNER/SHIPPER(I [redacted] e best of my knowledge.)

(b)(6)

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10 NM-CCA
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED FROM THE UNITED STATES OF AMERICA TO MEXICO

CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter: Dennis Chavez
   Nombre y Dirección del Exportador: 24 Dalies Rd
   Los Lunas, NM 87031
2. Name and Address of Importer: (b)(6)
   Nombre y Dirección del Importador: Carnicos De Jerez
   Jerez,Zacatecas 99380
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
985170000458995	Gelding	6	360155	Gelding	6
448928	Gelding	7	517879	Mare	7
458532	Mare	5	546133	Mare	6
545508	Gelding	5	456662	Gelding	5
456948	Mare	6	454969	Gelding	7
448741	Mare	8	576556	Gelding	9
456744	Mare	5	450677	Gelding	8
575018	Mare	6	455886	Gelding	4
458452	Mare	8	574722	Gelding	8
457753	Gelding	9	455412	Mare	6
517645	Gelding	7	449033	Gelding	5
451886	Mare	4	342979	Gelding	7
458712	Mare	9	563928	Gelding	8
513979	Mare	5	453226	Gelding	5
340935	Gelding	5	516311	Gelding	6
456953	Gelding	8	370123	Mare	8
516730	Gelding	7	517061	Gelding	9
451895	Gelding	8	449306	Gelding	7
542322	Mare	6	462532	Gelding	9
512346	Gelding	7	545459	Gelding	8

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10-NM-002
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
455136	Gelding	7	575090	Mare	7
457597	Mare	8	545322	Mare	6
512376	Gelding	6	472406	Gelding	8
453229	Gelding	5	573955	Gelding	7
513432	Mare	6	457629	Gelding	9
456511	Mare	8	452785	Mare	6
450737	Gelding	7	457054	Mare	7
452918	Mare	6	573025	Mare	5
456387	Gelding	6	454243	Gelding	9
456505	Gelding	5	540304	Mare	8
453175	Mare	5	459777	Mare	7
448119	Mare	9	474302	Gelding	9
575221	Gelding	6	562672	Gelding	5
458376	Mare	8	452679	Gelding	6
457504	Mare	5	453826	Gelding	7
518069	Gelding	5	545474	Gelding	6
454902	Gelding	6	474535	Gelding	8
455302	Gelding	7	544933	Gelding	6
515797	Mare	8	546046	Gelding	6
456002	Mare	5	457486	Mare	7
456789	Gelding	7	541584	Gelding	5
457186	Mare	6	544784	Gelding	6
562956	Gelding	8	564226	Gelding	5
455632	Mare	7	463971	Gelding	7
575769	Gelding	5	453607	Mare	6
577319	Mare	6	455491	Gelding	5
574489	Mare	4	576300	Mare	5
546056	Gelding	8	455868	Gelding	5
554379	Mare	7	541481	Gelding	6
545435	Mare	6	453553	Gelding	8
563880	Gelding	8	474462	Mare	7
575527	Gelding	4	562721	Gelding	9
574054	Mare	6	470974	Mare	5
544771	Gelding	6	461782	Mare	7
541143	Gelding	7	576467	Gelding	8
453853	Mare	6	544828	Gelding	4
447973	Gelding	8	450316	Gelding	5
577421	Mare	6	471560	Gelding	7
472071	Gelding	5	572458	Gelding	6
577126	Mare	8	515005	Gelding	7
449376	Mare	6	574235	Gelding	8
453373	Mare	7	455852	Gelding	6
552469	Gelding	8	513740	Gelding	7
563066	Gelding	6	464304	Gelding	6
574783	Gelding	7	542289	Gelding	8
545164	Gelding	8	574256	Mare	5
541448	Gelding	7	571746	Gelding	7
575039	Mare	6	541282	Gelding	6

USDA

Veterinary Services

National Center for Import and Export

Health Certificate No. 10-NM-002
(Valid only if the USDA Veterinary Seal Appears over the Certificate Number)

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
516296	Gelding	7			
475275	Mare	8			
473679	Gelding	5			
358839	Gelding	6			
471503	Mare	4			
474281	Gelding	8			
475861	Mare	6			
470559	Mare	7			
463582	Mare	3			
476080	Gelding	6			
542025	Mare	7			
463443	Gelding	5			
471245	Mare	8			
460873	Mare	6			
353860	Mare	7			
452072	Mare	6			
544935	Mare	8			

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. IC-NM-CC
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
517052	Gelding	6	572124	Gelding	7
457813	Mare	8	475899	Mare	6
574921	Gelding	7	454535	Gelding	5
473430	Gelding	6	453889	Gelding	7
512897	Mare	6	457452	Gelding	8
473537	Gelding	8	456879	Mare	6
573393	Gelding	7	455041	Mare	7
545089	Gelding	6	562314	Gelding	8
541749	Gelding	5	513876	Mare	8
545864	Mare	5	540585	Gelding	5
472272	Gelding	6	470632	Gelding	6
563447	Gelding	6	563131	Gelding	9
448874	Gelding	5	457079	Gelding	8
577119	Mare	5	473791	Gelding	8
450012	Gelding	7	571215	Gelding	5
451975	Mare	5	545132	Gelding	4
474799	Gelding	8	516884	Mare	7

CERTIFICATION STATEMENTS / *CERTIFICACIONES*

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / *Fecha de inspección* January 26th 2010

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectados por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

USDA

Veterinary Services

National Center for Import and Export

Health Certificate No. [illegible]
(Valid only if the USDA Veterinary Seal Appears over the Certificate Number)

(Delete as appropriate /*Remueva lo que no aplique)*

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.][

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.][*

C.Y Brasmer
Name of Accredited Veterinarian
Nombre del Médico Veterinario Acreditado

Walter F. Howe
Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario Federal que endosa.

1-26-2010
Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado y Fecha

1/27/10
Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario que endosa y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).*

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10-NM-002
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

AFFIDAVIT
DECLARACIÓN JURADA

I. Dennis Chavez declare that, to my best knowledge horses included in this shipment and accompanied by the health certificate # 10-NM-002 have not been fed or treated within the last one hundred and eighty days (180) prior to shipment with the following compounds, plants or drugs.
Por este medio declaro que a mi saber y entender los caballos en este embarque, acompañados por el certificado sanitario número 10-NM-002 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta (180) días antes del embarque.

1. Aristolochia spp and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (included furazolidone), ronidazol.
Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incuding furazolidona) y rodinazole.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol and raptopamine.
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol y raptopamina.

3. The following thyrosthatics substances were not used: thiouracil, methylthiouracil phenylthiouracil and propylthiouracil.
Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter [redacted] 1-26-10
Fecha y firma del exportador

Date and signature of the Notary Public 1-26-10
Fecha y firma del Notario Publico

OFFICIAL SEAL
Joan Chavez
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires: 11/27/11

Mexico, Slaughter horse HC

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NN-014

TIME HORSES LOADED ON CONVEYANCE: 3:00pm

DATE: 4-8-2010

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE: Los Lunas, New Mexico

VEHICLE LICENSE NO. AND DRIVER'S NAME: J&J Trucking [redacted] (b)(6)

NAME OF AUCTION/MARKET: Southwest Livestock

CONSIGNOR (OWNER/SHIPPER) NAME: Dennis Chavez

CONSIGNEE (RECEIVER/DESTINATION) NAME: [redacted] (b)(6)

STREET ADDRESS: 24 Dalies Rd

STREET ADDRESS: [redacted] (b)(6) 7741 Col. Independencia 2

CITY, STATE, ZIP CODE: Los Lunas, NM 87031

CITY, STATE, ZIP CODE: Juarez, Chihuahua MX

AREA CODE & TELEPHONE NO.: 505-865-4600

AREA CODE & TELEPHONE NO.: 01152 6656 130 110560

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- [x] Pregnant mares are not likely to foal (give birth) during the trip.
- [x] Foals are older than 6 months of age.
- [x] Horses are able to bear weight on all 4 limbs.
- [x] Horses are not blind in both eyes.
- [x] Horses are able to walk unassisted.

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USFH	1501						SR		/						/	1643869	
2		02		/						/				/			559381	
3		03		/						/						/	583838	
4		04						SR		/						/	610773	
5		05						roan		/				/			550526	
6		06				/				/				/			1646799	
7		07						roan		/						/	1637696	
8		08				/				/						/	573522	
9		09				/				/						/	587260	
10		10	/							/				/			610548	
11		11				/				/						/	550475	
12		12						SR		/						/	610597	
13		13		/						/				/			559731	
14		14	/							/				/			635371	
15		15						dun		/				/			600490	

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

SIGNATURE [redacted] (b)(6)

I HEREBY AUTHOR[redacted] INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER/I certify that the information contained in this form is true and correct to the best of my kn[redacted] (b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME [redacted]

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED
OMB NO.
0579-0160

10-NM-014

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USEH	1516						roan		/						/	557809	
17		17		/						/				/			600410	
18		18	/							/				/			586130	
19		19						SR		/				/			560857	
20		20				/				/						/	6571616	
21		21		/						/				/			585675	
22		22				/				/				/			610974	
23		23			/					/				/			5606139	
24		24						SR		/				/			584180	
25		25				/				/				/			551283	
26		26	/							/						/	5494446	
27		27						dun		/				/			560804	
28		28			/					/				/			598499	
29		29	/							/				/			610363	
30		30		/						/				/			588178	
31		31						dun		/				/			583517	
32		32	/							/				/			614419	
33		33		/						/				/			651037	
34		34						dun		/				/			585507	
35		35						SR					mule			/	6136665	
36		36		/						/				/			647192	
37		37				/				/				/			5946630	
38		38	/							/						/	583903	
39		39		/						/				/			599569	
40		40				/				/				/			610398	
41		41	/							/				/			339488	
42		42						SR		/				/			615973	
43		43						app		/						/	5146756	
44		44				/				/				/			6371160	
45		45						b.skin		/				/			655827	

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPP[redacted]orrect to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED
OMB NO.
0579-0160

10-NM-014

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	1546						dun		/				/			611218	
17		47						SR		/						/	645948	
18		48	/							/				/			655859	
19		49	/							/				/			565210	
20		50						roan		/				/			4B13355315	
21		51		/						/						/	600115	
22		52						roan		/				/			646103	
23		53				/				/				/			549188	
24		54			/					/						/	600791	
25		55				/				/						/	368943	
26		56				/				/						/	644572	
27		57	/							/				/			635068	
28		58		/						/						/	588741	
29		59				/				/						/	608498	
30		60	/							/						/	646603	
31		61				/				/				/			329454	
32		62						SR		/				/			554518	
33		63						SR		/						/	551927	
34		64	/							/				/			587362	
35		65		/						/						/	646194	
36		66						SR		/						/	593745	
37		67			/					/				/			610607	
38		68						SR		/				/			599993	
39		69			/					/				/			561081	
40		70		/						/				/			611916	
41		71				/				/				/			471519	
42		72				/				/				/			664407	
43		73						SR		/						/	598493	
44		74	/							/				/			586085	
45		75						paint		/				/			642828	

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify [redacted] t to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NN-014

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	1576						SR		/				/			645343	
17		77	/							/				/			588201	
18		78						dun		/				/			656614	
19		79	/							/						/	610313	
20		80	/							/				/			612919	
21		81						SR		/				/			606015	
22		82	/							/				/			651514	
23		83						SR					mule			/	585535	
24		84						SR		/				/			647216	
25		85				/				/						/	606581	
26		86		/						/						/	506448	
27		87			/					/				/			635594	
28		88						app		/						/	592840	
29		89		/						/				/			611872	
30		90	/							/				/			612414	
31		91						SR		/						/	558323	
32		92		/						/				/			588515	
33		93						SR					mule			/	587692	
34		94						SR		/				/			506611	
35		95				/				/				/			549670	
36		96	/							/				/			558314	
37		97				/				/				/			565264	
38		98		/						/				/			637727	
39		99		/						/						/	650012	
40		1600	/							/						/	649470	
41		01			/					/						/	661324	
42		02						dun		/				/			560061	
43		03		/						/				/			611096	
44		04			/					/				/			592264	
45		05						SR		/						/	560540	

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SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY (CONTINUATION SHEET)

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NN-014

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	16006						SR		/				/			611093	
17		07						SR		/				/			614213	
18		08	/							/				/			5606367	
19		09				/				/				/			579790	
20		10				/				/				/			501213	
21		11	/							/						/	594394	
22		12						SR		/				/			560582	
23		13		/						/				/			6457603	
24		14				/				/						/	588575	
25		15						SR		/						/	592389	
26		16						SR		/				/			6466795	
27		17						clun		/				/			560448	
28		18						SR		/				/			550733	
29		19						SR		/				/			501319	
30		20						amp		/						/	649081	
31		21	/							/						/	6130605	
32		22						SR		/				/			6466734	
33		23		/						/				/			611575	
34		24		/						/				/			501779	
35		25						amp		/						/	655850	
36		26	/							/						/	647838	
37		27						clun		/				/			592150	
38		28	/							/				/			592859	
39		29		/						/						/	649781	
40		30		/						/				/			649345	
41		31						pale		/				/			647220	
42		32						SR		/				/			592487	
43		33		/						/						/	6430666	
44		34						SR		/				/			547728	
45		35						pale		/				/			647082	

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SIGNATURE OF OWNER/SHIPPER(I [redacted] ect to the best of my knowledge.)

(b)(6)

VS FORM 10-13A
(SEP 2002)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY (CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NN-014

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16		1636						SR		/						/	648972	
17		37						SR		/				/			644440	
18		38	/							/						/	594328	
19		39		/						/				/			611518	
20		40	/							/				/			650680	
21		41	/							/				/			593172	
22		42	/							/				/			592449	
23		43				/				/						/	561588	
24		44						SR		/				/			593781	
25		45					/			/						/	593587	
26		46						SR		/				/			611780	
27		47						mon		/				/			594819	
28		48						SR		/						/	560847	
29		49						SR					mule			/	650575	
30		50				/				/				/			593607	
31		51		/						/				/			649590	
32		52	/							/						/	593495	
33		53	/							/				/			647858	
34		54	/							/				/			560279	
35		55	/							/						/	646394	
36		56	/							/				/			586854	
37		57						SR		/						/	656258	
38		58			/					/				/			666296	
39		59	/							/						/	550278	
40																		
41																		
42																		
43																		
44																		
45																		

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SIGNATURE OF OWNER/SHIPPER [redacted] d correct to the best of my knowledge.)

(b)(6)

USDA

VS
Veterinary Services

National Center for
Import and Export

Health Certificate No. 10-NM-014
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED FROM THE UNITED STATES OF AMERICA TO MEXICO

CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter: Dennis Chavez
   Nombre y Dirección del Exportador: 24 Dalies Rd
   Los Lunas, NM 87031
2. Name and Address of Importer: [redacted] (b)(6)
   Nombre y Dirección del Importador [redacted] (b)(6) 7741. Col.Independencáa 2
   Juarez,Chihuaha MX
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
643869	Gelding	7	600410	Mare	7
559381	Mare	4	586130	Mare	4
583838	Gelding	6	560857	Mare	5
619773	Gelding	6	657166	Gelding	4
550526	Mare	8	585675	Mare	8
646799	Mare	4	610974	Mare	4
637696	Gelding	5	566139	Mare	7
578522	Gelding	8	584180	Mare	4
587260	Gelding	3	551283	Mare	6
610548	Mare	8	549446	Gelding	7
550475	Gelding	4	560804	Mare	4
610597	Gelding	7	598499	Mare	6
559731	Mare	5	610363	Mare	9
635371	Mare	4	588178	Mare	6
600490	Mare	5	583517	Mare	6
557809	Gelding	3	614419	Mare	4

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10-NM-014
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
651037	Mare	7			
585507	Mare	6	613665	Gelding	7
647192	Mare	8	594630	Mare	5
583903	Gelding	4	599569	Mare	8
610398	Mare	7	339488	Mare	7
615973	Mare	6	516756	Gelding	6
637160	Mare	8	655827	Mare	8
611218	Mare	7	645948	Gelding	7
655859	Mare	6	565210	Mare	6
4b13355315	Mare	7	600115	Gelding	7
646103	Mare	5	549188	Mare	6
600791	Gelding	8	368943	Gelding	7
644572	Gelding	7	635068	Mare	5
588741	Gelding	8	608498	Gelding	7
646603	Gelding	6	329454	Mare	7
554518	Mare	6	551927	Gelding	6
587362	Mare	7	646194	Gelding	8
593745	Gelding	7	610607	Mare	7
599993	Mare	4	561081	Mare	9
611916	Mare	8	471519	Mare	7
664407	Mare	6	598493	Gelding	6
586085	Mare	5	642828	Mare	7
645343	Mare	7	588201	Mare	6
656614	Mare	5	610313	Gelding	7
612919	Mare	8	666015	Mare	5
651514	Mare	4	585535	Gelding	6
647216	Mare	4	666581	Gelding	6
566448	Gelding	7	635594	Mare	6
592840	Gelding	8	611872	Mare	5
612414	Mare	5	558323	Gelding	4
588515	Mare	7	587692	Gelding	8
566611	Mare	5	549670	Mare	5
558314	Mare	8	565264	Mare	5
637727	Mare	7	650012	Gelding	7
649470	Gelding	4	661324	Gelding	5
560061	Mare	6	611096	Mare	7
592264	Mare	8	560540	Gelding	9
611093	Mare	7	614213	Mare	7
566367	Mare	5	579790	Mare	5
561213	Mare	7	594394	Gelding	6

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Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
560582	Mare	6	645763	Mare	7
588575	Gelding	8	592389	Gelding	6
646795	Mare	5	560448	Mare	8
550733	Mare	4	561319	Mare	5
649081	Gelding	7	613065	Gelding	4
646734	Mare	6	611575	Mare	7
561779	Mare	9	655850	Gelding	4
647838	Gelding	4	592150	Mare	6
592859	Mare	4	649781	Gelding	9
649345	Mare	8	647220	Mare	7
592487	Mare	7	643066	Gelding	6
547728	Mare	5	647082	Mare	9
648972	Gelding	4	644440	Mare	5
594328	Gelding	5	611518	Mare	4
650680	Mare	6	593172	Mare	7
592449	Mare	7	561588	Gelding	8
593781	Mare	8	593587	Gelding	5
611780	Mare	5	594819	Mare	7
560847	Gelding	5	650575	Gelding	4
593607	Mare	5	649590	Mare	7
593495	Gelding	5	647858	Mare	6
560279	Mare	7	646394	Gelding	3
586854	Mare	5	656258	Gelding	4
666296	Mare	9	550278	Gelding	7

USDA

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Health Certificate No. 10-NN-014
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Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*

CERTIFICATION STATEMENTS / *CERTIFICACIONES*

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / *Fecha de inspección* April 8th 2010

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionddos epidemiológicamente con instalaciones o animales infectados.

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(Delete as appropriate /*Remueva lo que no aplique)*

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.][

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.][*

C.Y Brasmer
Name of Accredited Veterinarian
Nombre del Médico Veterinario Acreditado

Walter F. House
Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario Federal que endosa.

4/8/2010
Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado y Fecha

4/9/2010
Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario que endosa y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).*

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AFFIDAVIT
DECLARACIÓN JURADA

I. Dennis Chavez declare that, to my best knowledge horses included in this shipment and accompanied by the health certificate # _____ have not been fed or treated within the last one hundred and eighty days (180) prior to shipment with the follow compounds, plants or drugs.
Por este medio declaro que a mi saber y entender los caballos en este embarque, acompañados por el certificado sanitario número _____ no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta (180) días antes del embarque.

1. Aristolochia spp and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (included furazolidone), ronidazol.
Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incuding furazolidona) y rodinazole.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol and raptopamine. All Animals are free of steriods. CJ
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol y raptopamina As I como esteroids anabolicos. CJ

3. The following thyrosthatics substances were not used: thiouracil, methylthiouracil phenylthiouracil and propylthiouracil.
Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

[redacted] (b)(6)

Date and signature of the expo[redacted] 4/8/2010
Fecha y firma del exportador

Date and signature of the Notary Public _____ 4/8/2010
Fecha y firma del Notario Publico

OFFICIAL SEAL
Joan Chavez
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires: 11/27/11

Mexico, Slaughter horse HC

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NM-020

TIME HORSES LOADED ON CONVEYANCE: 5:00 AM

DATE: 5/9/2010

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE: Los Lunas, NM

VEHICLE LICENSE NO. AND DRIVER'S NAME: J + J Trucking [redacted]

NAME OF AUCTION/MARKET: Southwest Livestock Auction

CONSIGNOR (OWNER/SHIPPER) NAME: Dennis Chavez

CONSIGNEE (RECEIVER/DESTINATION) NAME: [redacted]

STREET ADDRESS: 24 Dalies Rd

STREET ADDRESS: [redacted] 7741 Col. Independencia 2

CITY, STATE, ZIP CODE: Los Lunas NM 87031

CITY, STATE, ZIP CODE: Juarez, Chihuaha, MX

AREA CODE & TELEPHONE NO.: 505-865-4600

AREA CODE & TELEPHONE NO.: 915-252-6614

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- [✓] Pregnant mares are not likely to foal (give birth) during the trip.
- [✓] Horses are able to bear weight on all 4 limbs.
- [✓] Foals are older than 6 months of age.
- [✓] Horses are not blind in both eyes.
- [✓] Horses are able to walk unassisted.

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USFH	7751		✓						✓				✓			377488	
2		7752						Sorrel		✓				✓			378923	
3		7753						Buck Skin		✓				✓			368262	
4		7754		✓						✓				✓			379623	
5		7755	✓							✓						✓	404975	
6		7756	✓							✓				✓			369570	
7		7757						Sorrel		✓				✓			573620	
8		7758						Buck Skin		✓				✓			378168	
9		7759						Sorrel		✓						✓	372376	
10		7760						Palo		✓				✓			368819	
11		7761			✓					✓				✓			377480	
12		7762						Sorrel		✓				✓			405595	
13		7763				✓				✓						✓	372211	
14		7764						Sorrel					Mule			✓	403873	
15		7765						Sorrel		✓				✓			375746	

HORSES [redacted] OF 6 CONSECUTIVE HOURS IM[redacted]

SIGNATU[redacted]

[redacted]

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE [redacted] e and correct to the best of m[redacted]

[redacted]

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

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			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	7766		✓				Sorr		✓				✓			381177	
17		7767						Sorr		✓						✓	376950	
18		7768						Sorr		✓						✓	371159	
19		7769						Buck		✓						✓	374033	
20		7770						Sorr		✓							NO 60	
21		7771						Sorr		✓				✓			376721	
22		7772								✓						✓	404968	
23		7773	✓					Roan		✓				✓			402617	
24		7774						Sorr		✓						✓	366964	
25		7775						Sorr			✓			✓			368300	
26		7776						Sorr		✓						✓	402271	
27		7777				✓				✓				✓			373226	
28		7778						Sorr		✓						✓	371957	
29		7779			✓			Sorr		✓				✓			371211	
30		7780						Sorr		✓						✓	367512	
31		7781						Sorr		✓				✓			367660	
32		7782						Roan		✓				✓			472663	
33		7783		✓						✓				✓			400603	
34		7784						Pato		✓				✓			379385	
35		7785						Sorr		✓				✓			371552	
36		7786						Roan		✓						✓	398560	
37		7787		✓						✓				✓			414305	
38		7788				✓				✓				✓			367595	
39		7789						Sorr		✓						✓	367085	
40		7790						Sorr		✓				✓			400612	
41		7791			✓					✓				✓			374693	
42		7792				✓				✓				✓			405842	
43		7793						Sorr		✓				✓			345704	
44		7794		✓						✓				✓			358327	
45	✓	7795	✓							✓				✓			358978	

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SI[redacted] this form is true and correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

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			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	45FH	7796		✓						✓						✓	381107	
17		7797		✓						✓				✓			399773	
18		7798						Sorrel		✓						✓	400593	
19		7799						Sorrel		✓				✓			398328	
20		7800						Roan		✓						✓	405911	
21	45FG	9551				✓				✓						✓	400581	
22		9552		✓						✓						✓	400347	
23		9553						Sorrel		✓				✓			399515	
24		9554			✓					✓				✓			366642	
25		9555						App		✓				✓			401277	
26		9556						Palo		✓				✓			399619	
27		9557				✓				✓				✓			399568	
28		9558	✓							✓				✓			406513	
29		9559						Sorrel		✓				✓			414636	
30		9560						Roan		✓				✓			415320	
31		9561						Sorrel		✓						✓	400663	
32		9562		✓						✓				✓			399452	
33		9563				✓				✓				✓			366708	
34		9564						Sorrel		✓						✓	399044	
35		9565						Sorrel		✓				✓			400901	
36		9566				✓				✓						✓	404926	
37		9567				✓				✓				✓			402590	
38		9568	✓							✓				✓			407954	
39		9569						Dun		✓						✓	406717	
40		9570						Sorrel		✓						✓	400661	
41		9571		✓						✓				✓			369981	
42		9572	✓							✓				✓			378208	
43		9573						Sorrel		✓						✓	399031	
44		9574						Roan		✓				✓			369736	
45		9575				✓				✓						✓	376220	

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SIGNATURE [redacted] s true and correct to the best of my knowledge.)

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			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9571		✓						✓				✓			407651	
17		9577	✓							✓				✓			399432	
18		9578						APP		✓				✓			367912	
19		9579	✓							✓						✓	377760	
20		9580						SORR		✓				✓			369235	
21		9581						ROAN		✓				✓			380707	
22		9582	✓							✓				✓			404259	
23		9583	✓							✓						✓	406147	
24		9584						SORR		✓				✓			375517	
25		9585						SORR		✓				✓			367480	
26		9586						ROAN		✓						✓	400918	
27		9587		✓						✓				✓			366978	
28		9588	✓							✓						✓	378484	
29		9589						SORR		✓				✓			380663	
30		9590						SORR		✓						✓	403850	
31		9591	✓							✓				✓			414905	
32		9592						BORR		✓						✓	369429	
33		9593	✓							✓				✓			408571	
34		9594	✓							✓				✓			402432	
35		9595	✓							✓				✓			398857	
36		9596				✓				✓				✓			399801	
37		9597						SORR		✓				✓			403940	
38		9598	✓							✓						✓	350034	
39		9599		✓						✓						✓	414910	
40	↓	9600								✓							SKIP	
41		9751						SORR		✓				✓			377131	
42		9752						SORR		✓						✓	371762	
43		9753		✓						✓						✓	321754	
44		9754	✓							✓				✓			377510	
45	↓	9755				✓				✓				✓			377857	

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SIGNAT[redacted]his form is true and correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NN-020

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9756	✓							✓				✓			369612	
17		9757						Sorrel		✓				✓			377210	
18		9758						Sorrel			✓		Mule	✓			399431	
19		9759						Sorrel		✓				✓			403437	
20		9760						Sorrel		✓						✓	417764	
21		9761		✓						✓				✓			368065	
22		9762						Sorrel		✓				✓			403763	
23		9763		✓						✓						✓	380618	
24		9764	✓							✓				✓			400274	
25		9765			✓					✓				✓			401810	
26		9766						Sorrel		✓						✓	377479	
27		9767															Skip	
28		9768						Sorrel		✓				✓			401643	
29		9769	✓							✓				✓			369098	
30		9770						Sorrel		✓				✓			400416	
31		9771	✓							✓						✓	407407	
32		9772	✓							✓				✓			375394	
33		9773		✓						✓				✓			402656	
34		9774				✓				✓				✓			400967	
35		9775	✓							✓						✓	414936	
36		9776						Palo		✓				✓			399453	
37		9777	✓							✓						✓	400332	
38		9778		✓						✓						✓	400036	
39		9779		✓						✓						✓	401537	
40		9780						Sorrel		✓						✓	398616	
41		9781		✓						✓				✓			399589	
42		9782						Sorrel		✓						✓	373029	
43		9783						Sorrel		✓				✓			372684	
44		9784						Sorrel		✓				✓			573284	
45	↓	9785	✓							✓				✓			413389	

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SIGNAT[redacted]s form is true and correct to the best of my knowledge.)

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U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

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FORM APPROVED OMB NO. 0579-0160

10-NM-020

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9786				✓				✓				✓			402354	
17		9787						Sorrel		✓						✓	414591	
18		9788		✓						✓						✓	401685	
19		9789						Sorrel		✓				✓			412626	
20		9790		✓						✓				✓			404358	
21		9791						Sorrel		✓				✓			399545	
22		9792						Sorrel		✓						✓	401126	
23		9793						Sorrel		✓						✓	403946	
24		9794	✓							✓				✓			399544	
25		9795								✓						✓	371848	
26		9796						Sorrel		✓				✓			415737	
27		9797			✓					✓				✓			374333	No Go
28		9798						Sorrel		✓						✓	371797	
29		9799						Sorrel		✓				✓			404850	
30		9951	✓							✓				✓			407336	
31		9952	✓							✓						✓	400355	
32		9953						Sorrel		✓				✓			400361	
33		9954						Sorrel		✓				✓			473236	
34		9955	✓							✓				✓			401027	
35		9956						Roan		✓				✓			370510	
36		9957	✓							✓				✓			400166	
37		9958				✓				✓				✓			367224	
38		9959		✓						✓				✓			368354	
39		9960						Palo		✓				✓			401499	
40		9961	✓							✓				✓			403627	
41		9962						Sorrel		✓						✓	370446	
42		9963	✓							✓						✓	414436	
43		9964						Roan		✓						✓	401772	
44		9965		✓						✓						✓	367924	
45	↓	9966				✓				✓				✓			402186	

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SIGNAT[redacted] his form is true and correct to the best of my knowledge.)

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U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
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FORM APPROVED OMB NO. 0579-0160

10-NM-020

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9962		✓						✓						✓	399193	
17		9968					Roan			✓						✓	401026	
18		9969					Sorrel			✓						✓	402669	
19		9970					Pal			✓				✓			370424	
20		9971				✓				✓						✓	408610	
21		9972		✓			Sorr			✓						✓	372217	
22		9973	✓							✓				✓			369173	
23		9974			✓					✓				✓			373288	
24		9975					Bskd.			✓						✓	402600	
25		9976	✓							✓						✓	403669	
26		9977					Palo			✓				✓			359832	
27		9978		✓						✓				✓			368675	
28		9979	✓							✓						✓	374719	
29		9980					Sorr			✓						✓	370412	
30		9981					Roan			✓				✓			374364	
31		9982	✓							✓						✓	378096	
32		9983					Sorr			✓				✓			378721	
33		9984	✓							✓				✓			401296	
34		9985					Sorr			✓						✓	371812	
35		9986			✓					✓				✓			402425	
36		9987		✓						✓				✓			377812	
37		9988	✓							✓						✓	370062	
38		9989			✓					✓						✓	378177	
39		9990					Sorr			✓				✓			376461	
40		9991			✓					✓						✓	374761	
41		9992	✓							✓						✓	647388	
42		9993	✓							✓				✓			399217	
43		9994	✓							✓						✓	400466	
44		9995				✓				✓				✓			369577	
45	↓	9996			✓					✓				✓			378477	

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SIGNATURE [redacted] e and correct to the best of my knowledge.)

(b)(6)

VS FORM 10-13A
(SEP 2002)

*U.S. Government Printing Office: 2004—616-624/99766

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

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FORM APPROVED OMB NO. 0579-0160

10-NM-020

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	115FG	9997						Sorrel		✓				✓			400285	
17		9998				✓				✓						✓	401097	
18		9999						Sorrel		✓				✓			404851	
19		4907						Sorrel		✓				✓			367212	
20		4908	✓							✓				✓			665670	
21		4909						Black Skin		✓				✓			371952	
22		4910			✓					✓				✓			378575	
23		4911						Sorrel		✓				✓			376604	
24		1889	✓						✓					✓			643316	
25		1890	✓						✓					✓			607402	
26		1891	✓						✓					✓			614316	
27		1892	✓						✓					✓			609802	
28		1893	✓						✓					✓			651020	
29		1894	✓						✓					✓			559625	
30		1895	✓						✓					✓			584898	
31		1896	✓						✓					✓			600198	
32	↓	9530	✓						✓							✓	401581	
33																		
34																		
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SIGNATURE [redacted] this form is true and correct to the best of my knowledge.)

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*U.S. Government Printing Office: 2004—616-624/99766

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10-NN-020
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)
WFH

INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED FROM THE UNITED STATES OF AMERICA TO MEXICO

CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchideos.

1. Name and Address of Exporter: Dennis Chavez
   Nombre y Dirección del Exportador: 24 Dalies Rd
   Los Lunas,NM 87031
2. Name and Address of Importer:
   Nombre y Dirección del Importador (b)(6) (b)(6) 7741,Col.Independencia 2
   Juarez,Chihuaha MX
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
377488	Mare	5	378923	Mare	6
368262	Mare	6	379623	Mare	9
404975	Gelding	7	369570	Mare	5
573620	Mare	4	378168	Mare	7
372376	Gelding	3	368819	Mare	9
377480	Mare	8	405595	Mare	4
372211	Gelding	6	403873	Gelding	7
375746	Mare	5	381177	Mare	8
376950	Gelding	7	371159	Gelding	4
374033	Gelding	5	376721	Mare	5
404968	Gelding	4	402617	Mare	7
366964	Gelding	4	368300	Mare	5
402271	Gelding	5	373226	Mare	8
371957	Gelding	8	371211	Mare	6
367512	Gelding	4	367660	Mare	5
472633	Mare	7	400603	Mare	9

USDA

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Health Certificate No. 10-NN-020
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WFH

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
379385	Mare	7	371552	Mare	6
398560	Gelding	4	414305	Mare	8
367595	Mare	8	367085	Gelding	8
400612	Mare	6	374693	Mare	7
405842	Mare	8	345509	Mare	8
398327	Mare	5	398978	Mare	6
381107	Gelding	6	399773	Mare	7
400593	Gelding	8	398328	Mare	6
405911	Gelding	5	400581	Gelding	7
400347	Gelding	8	399515	Mare	9
366642	Mare	7	401277	Mare	8
399619	Mare	5	399568	Mare	7
406513	Mare	8	414636	Mare	7
415320	Mare	7	400663	Gelding	5
399452	Mare	4	366708	Mare	8
399044	Gelding	8	400901	Mare	6
404926	Gelding	5	402590	Mare	7
407954	Mare	8	406717	Gelding	8
400661	Gelding	5	369981	Mare	7
378208	Mare	9	399031	Gelding	5
369736	Mare	7	376220	Gelding	9
407651	Mare	4	399433	Mare	6
367952	Mare	6	377760	Gelding	6
369239	Mare	8	380707	Mare	8
404259	Mare	5	406147	Gelding	6
375517	Mare	8	367480	Mare	6
400918	Gelding	5	366978	Mare	9
378484	Gelding	8	380663	Mare	7
403890	Gelding	7	414905	Mare	8
369429	Gelding	5	408571	Mare	5
402432	Mare	6	398897	Mare	6
399801	Mare	7	403940	Mare	8
399034	Gelding	4	414950	Gelding	8
377431	Mare	8	371762	Gelding	6
321754	Gelding	7	377910	Mare	7
377857	Mare	5	369612	Mare	6
377210	Mare	7	399431	Mare	7
403437	Mare	5	417764	Gelding	8
368065	Mare	8	403763	Mare	6
380618	Gelding	4	400274	Mare	8

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WFH

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
401810	Mare	7	377479	Gelding	6
401643	Mare	4	369098	Mare	5
400416	Mare	8	407407	Gelding	7
375394	Mare	6	402656	Mare	9
400967	Mare	6	414936	Gelding	9
399453	Mare	7	400332	Gelding	4
400036	Gelding	4	401537	Gelding	7
398616	Gelding	8	399589	Mare	8
373029	Gelding	4	372684	Mare	7
573284	Mare	8	413389	Mare	6
402354	Mare	7	414591	Gelding	8
401685	Gelding	5	412626	Mare	7
404358	Mare	7	399545	Mare	6
401126	Gelding	5	403946	Gelding	8
399544	Mare	6	371848	Gelding	8
415737	Mare	7	371797	Gelding	7
404850	Mare	4	407336	Mare	4
400355	Gelding	8	400361	Mare	8
473236	Mare	4	401027	Mare	7
370510	Mare	7	400166	Mare	5
367224	Mare	4	368354	Mare	7
401499	Mare	3	403627	Mare	6
370446	Gelding	7	414436	Gelding	9
401772	Gelding	5	367924	Gelding	7
402186	Mare	8	399193	Gelding	6
401026	Gelding	7	402664	Gelding	8
370424	Mare	4	408610	Gelding	7
372217	Gelding	7	369173	Mare	9
373288	Mare	6	402600	Gelding	7
403669	Gelding	5	399832	Mare	8
368675	Mare	7	374719	Gelding	6
370412	Gelding	4	374369	Mare	5
378096	Gelding	4	378721	Mare	7
401296	Mare	6	371812	Gelding	5
402425	Mare	5	377852	Mare	8
375062	Gelding	3	378177	Gelding	6
376461	Mare	7	374761	Gelding	8
647388	Gelding	6	399217	Mare	7
400466	Gelding	4	369577	Mare	6
378477	Mare	7	400285	Mare	8

USDA

Veterinary Services

National Center for Import and Export

Health Certificate No. 10-NN-020
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Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
401097	Gelding	6	404851	Mare	5
367212	Mare	8	665670	Mare	8
371952	Mare	8	378575	Mare	5
376606	Mare	4	643316	Mare	5
607402	Mare	5	614316	Mare	5
609802	Mare	5	651020	Mare	5
559625	Mare	5	584898	Mare	5
600198	Mare	5	401581	Gelding	5

USDA

Veterinary Services

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Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*

CERTIFICATION STATEMENTS / *CERTIFICACIONES*

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / *Fecha de inspección* May 9th 2010

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

USDA

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WFH

(Delete as appropriate /*Remueva lo que no aplique)*

5.

[Within 5 days prior to export, the animals were dipped in coumaphos at 400 ppm. Spraying of the product is only authorized using a motor pump with coumaphos at 400 ppm.]
(NOM-019-ZOO-1994)] May 5, 2010

[Los animales fueron tratados dentro de los 5 días previos al embarque con un baño de inmersión con coumaphos a concentración de 400 ppm. Solamente se autoriza el baño de aspersión cuando se utilice bomba de motor y se aplique una dosis de 400 ppm de coumaphos]
(NOM-019-ZOO-1994)] May 5, 2010

C.Y. Brasmer
Name of Accredited Veterinarian
Nombre del Médico Veterinario Acreditado

Walter F. Howe
Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario Federal que endosa.

May 5, 2010
Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado y Fecha

5/10/10
Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario que endosa y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).*

USDA

Veterinary Services

National center for
Import and Export

Health Certificate No. 10-NM-020
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

WFP

AFFIDAVIT
DECLARACIÓN JURADA

I (print) Dennis Chavez declare that the horses included in this shipment have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.
Por este medio declaro que los caballos en este embarque no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.
Aristolochia spp *y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.*

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.
Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter [redacted] /9/2010
Fecha y firma del exportador

Date and signature of the Notary Public 5/9/2010
Fecha y firma del Notario Público

OFFICIAL SEAL
Joan Chavez
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires: 11/27/11

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NM-019

TIME HORSES LOADED ON CONVEYANCE: 3:00pm

DATE: 5-2-2010

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE: Los Lunas, New Mexico

VEHICLE LICENSE NO. AND DRIVER'S NAME: J&J Trucking- [redacted] (b)(6)

NAME OF AUCTION/MARKET: Southwest Livestock

CONSIGNOR (OWNER/SHIPPER) NAME: Dennis Chavez

CONSIGNEE (RECEIVER/DESTINATION) NAME: [redacted] (b)(6)

STREET ADDRESS: 24 Dalies Rd

STREET ADDRESS: [redacted] (b)(6) 7741 Col Independencia 2

CITY, STATE, ZIP CODE: Los Lunas, nm 87031

CITY, STATE, ZIP CODE: Juarez, Chihuaha MX

AREA CODE & TELEPHONE NO.: 505-865-4600

AREA CODE & TELEPHONE NO.: 915-252-66614

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- [x] Pregnant mares are not likely to foal (give birth) during the trip.
- [x] Foals are older than 6 months of age.
- [x] Horses are able to bear weight on all 4 limbs.
- [x] Horses are not blind in both eyes.
- [x] Horses are able to walk unassisted.

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USFH	7751		/						/				/			377488	
2		52						SR		/				/			378923	
3		53						b.skin		/				/			368262	
4		54		/						/				/			379623	
5		55	/							/						/	404975	
6		56	/							/				/			369570	
7		57						SR		/				/			573620	
8		58						b.skin		/				/			378168	
9		59						SR		/						/	372376	
10		60						paleo		/				/			368819	
11		61			/					/				/			377480	
12		62						SR		/				/			405595	
13		63				/				/						/	372211	
14		64						SR					mule			/	403873	
15		65						SR		/				/			375741	

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIAT[redacted] (b)(6)

SIGNATURE

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE [redacted] (b)(6) ed in this form is true and correct to the best of my

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

ious editions are obslete

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NN-019

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	77166		/						/				/			381177	
17		67						SR		/						/	376950	
18		68						SR		/						/	371159	
19		69						SR		/						/	374033	
20		70						b.skin		/					no	go		
21		71						SR		/				/			376721	
22		72						SR		/						/	404968	
23		73	/							/				/			402617	
24		74						non		/						/	3669964	
25		75						SR			/			/			368300	
26		76						SR		/						/	402271	
27		77				/				/				/			373226	
28		78						SR		/						/	371957	
29		79			/					/				/			371211	
30		80						SR		/						/	367512	
31		81						SR		/				/			3676660	
32		82						non		/				/			472633	
33		83		/						/				/			400603	
34		84						Polo		/				/			379385	
35		85						SR		/				/			371552	
36		86						non		/						/	398560	
37		87		/						/				/			414305	
38		88				/				/				/			367595	
39		89						SR		/						/	367085	
40		90						SR		/				/			400612	
41		91			/					/				/			374693	
42		92				/				/				/			405842	
43		93						SR		/				/			345509	
44		94		/						/				/			398327	
45		95	/							/				/			398978	

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SIGNATURE OF OWNER/S [redacted] and correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NN-019

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	7796		/						/						/	381107	
17		97		/						/				/			399773	
18		98						SR		/						/	400593	
19		99						SR		/				/			398328	
20	USFG	7800						roan		/						/	405911	
21		9551				/				/						/	400581	
22		52		/						/						/	400347	
23		53						SR		/				/			399515	
24		54			/					/				/			3606642	
25		55						app		/				/			401277	
26		56						palo		/				/			399619	
27		57				/				/				/			399568	
28		58	/							/				/			406513	
29		59						SR		/				/			4146636	
30		60						roan		/				/			415320	
31		61						SR		/						/	400663	
32		62		/						/				/			399452	
33		63				/				/				/			3606708	
34		64						SR		/						/	399044	
35		65						SR		/				/			400901	
36		66				/				/						/	404926	
37		67				/				/				/			402590	
38		68	/							/				/			407954	
39		69						dun		/						/	406717	
40		70						SR		/						/	400661	
41		71		/						/				/			3699 81	
42		72	/							/				/			378208	
43		73						SR		/						/	399031	
44		74						roan		/				/			3697336	
45		75				/				/						/	3762220	

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SIGNATURE OF OWNER/SHIPPER([redacted] and correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NN-019

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9576		/						/				/			407651	
17		77	/							/				/			399433	
18		78						app		/				/			367952	
19		79	/							/						/	377760	
20		80						SR		/				/			369239	
21		81						roan		/				/			380707	
22		82	/							/				/			404259	
23		83	/							/						/	406147	
24		84						SR		/				/			375517	
25		85						SR		/				/			367480	
26		86						roan		/						/	400918	
27		87		/						/				/			366978	
28		88	/							/						/	378484	
29		89						SR		/				/			380663	
30		90						SR		/						/	403890	
31		91	/							/				/			414905	
32		92						SR		/						/	369429	
33		93	/							/				/			408571	
34		94	/							/				/			402432	
35		95	/							/				/			398897	
36		96				/				/				/			399301	
37		97						SR		/				/			403940	
38		98	/							/						/	399034	
39		99		/						/						/	414950	
40		9600		OKiD 9600						/				/			none	
41		9751						SR		/				/			377431	
42		52						SR		/						/	371762	
43		53		/						/						/	321754	
44		54	/							/				/			377910	
45		55				/				/				/			377857	

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SIGNATURE OF OWNER/[redacted] rue and correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NN-019

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9756	/							/				/			3169612	
17		57						SR		/				/			377210	
18		58						SR			/		mule	/			399431	
19		59						SR		/				/			403437	
20		60						SR		/						/	417764	
21		61		/						/				/			3168065	
22		62						SR		/				/			4037663	
23		63		/						/						/	380618	
24		64	/							/				/			400274	
25		65			/					/				/			401810	
26		66						SR		/						/	377479	
27		67										Skipped						
28		68						SR		/				/			401643	
29		69	/							/				/			3169098	
30		70						SR		/				/			400416	
31		71	/							/						/	407407	
32		72	/							/				/			375394	
33		73		/						/				/			4026656	
34		74				/				/				/			400967	
35		75	/							/						/	414936	
36		76						paid		/				/			399453	
37		77	/							/						/	400332	
38		78		/						/						/	400036	
39		79		/						/						/	401537	
40		80						SR		/						/	398616	
41		81		/						/				/			399589	
42		82						SR		/						/	373029	
43		83						SR		/				/			372684	
44		84						SR		/				/			573284	
45		85	/							/				/			413389	

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR [redacted]1).

SIGNATURE OF OWN [redacted] true and correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NM-019

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9786				/				/				/			402354	
17		87						SR		/						/	414591	
18		88		/						/						/	401685	
19		89						SR		/				/			412626	
20		90		/						/				/			404358	
21		91						SR		/				/			399545	
22		92						SR		/						/	401126	
23		93						SR		/						/	403946	
24		94	/							/				/			399544	
25		95								/						/	371848	
26		96						SR		/				/			415737	
27		97			/					/				/			374333	no go
28		98						SR		/						/	371797	
29		99						SR		/				/			404850	
30		9951	/							/				/			407336	
31		52	/							/						/	400355	
32		53						SR		/				/			400361	
33		54						SR		/				/			473236	
34		55	/							/				/			401027	
35		56						roan		/				/			370510	
36		57	/							/				/			400166	
37		58				/				/				/			367224	
38		59		/						/				/			368354	
39		60						paio		/				/			401499	
40		61	/							/				/			403627	
41		62						SR		/						/	370446	
42		63	/							/						/	414436	
43		64						roan		/						/	401772	
44		65		/						/						/	367924	
45		66				/				/				/			402186	

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SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NN-019

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9967		/						/						/	399193	
17		68						roan		/						/	401026	
18		69						SR		/						/	4026064	
19		70						paint		/				/			370424	
20		71				/				/						/	4086010	
21		72						SR		/						/	372217	
22		73	/							/				/			369173	
23		74			/					/				/			373288	
24		75						bsln		/						/	402600	
25		76	/							/						/	4036069	
26		77						paint		/				/			399832	
27		78		/						/				/			368675	
28		79	/							/						/	374719	
29		80						SR		/						/	370412	
30		81						roan		/				/			374369	
31		82	/							/						/	378096	
32		83						SR		/				/			378721	
33		84	/							/				/			401296	
34		85						SR		/						/	371812	
35		86			/					/				/			402425	
36		87		/						/				/			377852	
37		88	/							/						/	375062	
38		89			/					/						/	378177	
39		90						SR		/				/			376461	
40		91			/					/						/	374761	
41		92	/							/						/	1047388	
42		93	/							/				/			399217	
43		94	/							/						/	4004666	
44		95				/				/				/			369577	
45		96			/					/				/			378477	

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SIGNATURE OF OWNER/SHIP [redacted] correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NN-019

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9997						SR		/				/			400285	
17		98				/				/						/	401097	
18		99						SR		/				/			404851	
19		4907						SR		/				/			367212	
20		08	/							/				/			6651670	
21		09						DSKIN		/				/			371952	
22		10			/					/				/			378575	
23		11						SR		/				/			3766606	
24		1889	/						/								643316	
25		90	/						/								607402	
26		91	/						/								614316	
27		92	/						/								609802	
28		93	/						/								651020	
29		94	/						/								559625	
30		95	/						/								584898	
31		96	/						/								600198	
32		9530	/						/								401581	
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45																		

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MOR

SIGNATURE OF OWNER/SHIPP [redacted] and correct to the best of my knowledge.)

(b)(6)

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10-NM-019
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)
WFH

INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED FROM THE UNITED STATES OF AMERICA TO MEXICO

CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: *México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.*

1. Name and Address of Exporter: Dennis Chavez
   Nombre y Dirección del Exportador: 24 Dalies Rd
   Los Lunas,NM 87031
2. Name and Address of Importer: [redacted] (b)(6)
   Nombre y Dirección del Importador: [redacted] (b)(6) 7741,Col.Independencia 2
   Juarez,Chihuaha MX
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
377488	Mare	5	378923	Mare	6
368262	Mare	6	379623	Mare	9
404975	Gelding	7	369570	Mare	5
573620	Mare	4	378168	Mare	7
372376	Gelding	3	368819	Mare	9
377480	Mare	8	405595	Mare	4
372211	Gelding	6	403873	Gelding	7
375746	Mare	5	381177	Mare	8
376950	Gelding	7	371159	Gelding	4
374033	Gelding	5	376721	Mare	5
404968	Gelding	4	402617	Mare	7
366964	Gelding	4	368300	Mare	5
402271	Gelding	5	373226	Mare	8
371957	Gelding	8	371211	Mare	6
367512	Gelding	4	367660	Mare	5
472633	Mare	7	400603	Mare	9

USDA

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Veterinary Services

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Health Certificate No. 10-NN-019
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
379385	Mare	7	371552	Mare	6
398560	Gelding	4	414305	Mare	8
367595	Mare	8	367085	Gelding	8
400612	Mare	6	374693	Mare	7
405842	Mare	8	345509	Mare	8
398327	Mare	5	398978	Mare	6
381107	Gelding	6	399773	Mare	7
400593	Gelding	8	398328	Mare	6
405911	Gelding	5	400581	Gelding	7
400347	Gelding	8	399515	Mare	9
366642	Mare	7	401277	Mare	8
399619	Mare	5	399568	Mare	7
406513	Mare	8	414636	Mare	7
415320	Mare	7	400663	Gelding	5
399452	Mare	4	366708	Mare	8
399044	Gelding	8	400901	Mare	6
404926	Gelding	5	402590	Mare	7
407954	Mare	8	406717	Gelding	8
400661	Gelding	5	369981	Mare	7
378208	Mare	9	399031	Gelding	5
369736	Mare	7	376220	Gelding	9
407651	Mare	4	399433	Mare	6
367952	Mare	6	377760	Gelding	6
369239	Mare	8	380707	Mare	8
404259	Mare	5	406147	Gelding	6
375517	Mare	8	367480	Mare	6
400918	Gelding	5	366978	Mare	9
378484	Gelding	8	380663	Mare	7
403890	Gelding	7	414905	Mare	8
369429	Gelding	5	408571	Mare	5
402432	Mare	6	398897	Mare	6
399801	Mare	7	403940	Mare	8
399034	Gelding	4	414950	Gelding	8
377431	Mare	8	371762	Gelding	6
321754	Gelding	7	377910	Mare	7
377857	Mare	5	369612	Mare	6
377210	Mare	7	399431	Mare	7
403437	Mare	5	417764	Gelding	8
368065	Mare	8	403763	Mare	6
380618	Gelding	4	400274	Mare	8

USDA

Veterinary Services

National Center for Import and Export

Health Certificate No. 10-NM-019
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UFH

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
401810	Mare	7	377479	Gelding	6
401643	Mare	4	369098	Mare	5
400416	Mare	8	407407	Gelding	7
375394	Mare	6	402656	Mare	9
400967	Mare	6	414936	Gelding	9
399453	Mare	7	400332	Gelding	4
400036	Gelding	4	401537	Gelding	7
398616	Gelding	8	399589	Mare	8
373029	Gelding	4	372684	Mare	7
573284	Mare	8	413389	Mare	6
402354	Mare	7	414591	Gelding	8
401685	Gelding	5	412626	Mare	7
404358	Mare	7	399545	Mare	6
401126	Gelding	5	403946	Gelding	8
399544	Mare	6	371848	Gelding	8
415737	Mare	7	371797	Gelding	7
404850	Mare	4	407336	Mare	4
400355	Gelding	8	400361	Mare	8
473236	Mare	4	401027	Mare	7
370510	Mare	7	400166	Mare	5
367224	Mare	4	368354	Mare	7
401499	Mare	3	403627	Mare	6
370446	Gelding	7	414436	Gelding	9
401772	Gelding	5	367924	Gelding	7
402186	Mare	8	399193	Gelding	6
401026	Gelding	7	402664	Gelding	8
370424	Mare	4	408610	Gelding	7
372217	Gelding	7	369173	Mare	9
373288	Mare	6	402600	Gelding	7
403669	Gelding	5	399832	Mare	8
368675	Mare	7	374719	Gelding	6
370412	Gelding	4	374369	Mare	5
378096	Gelding	4	378721	Mare	7
401296	Mare	6	371812	Gelding	5
402425	Mare	5	377852	Mare	8
375062	Gelding	3	378177	Gelding	6
376461	Mare	7	374761	Gelding	8
647388	Gelding	6	399217	Mare	7
400466	Gelding	4	369577	Mare	6
378477	Mare	7	400285	Mare	8

USDA

VS
Veterinary Services

National Center for
Import and Export

Health Certificate No. 10-NM-019
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LUFB

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
401097	Gelding	6	404851	Mare	5
367212	Mare	8	665670	Mare	8
371952	Mare	8	378575	Mare	5
376606	Mare	4	643316		5
607402		5	614316		5
609802		5	651020		5
559625		5	584898		5
600198		5	401581		5

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10-NN-019
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UFB

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*

CERTIFICATION STATEMENTS / *CERTIFICACIONES*

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / *Fecha de inspección* May 2nd 2010

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

USDA

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(Delete as appropriate /*Remueva lo que no aplique)*

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.][

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.][*

C.Y Brasmer
Name of Accredited Veterinarian
Nombre del Médico Veterinario Acreditado

Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario Federal que endosa.

5/2/2010
Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado y Fecha

5/3/10
Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario que endosa y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).*

10-NM-019
WFB

AFFIDAVIT
DECLARACIÓN JURADA

I (print) Dennis Chavez declare that the horses included in this shipment have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.
Por este medio declaro que los caballos en este embarque no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.
Aristolochia spp *y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.*

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.
Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter [redacted] (b)(6) 5/2/2010
Fecha y firma del exportador

Date and signature of the Notary Public 5/2/2010
Fecha y firma del Notario Público

OFFICIAL SEAL
Joan Chavez
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires: 11/24/11

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(Please type or print in ink)

Display of this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

APPROVED OMB NO. 0579-0160

10-NM-016

TIME HORSES LOADED ON CONVEYANCE: 3:00pm

DATE: 4-15-10

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE: Los Lunas, New Mexico

VEHICLE LICENSE NO. AND DRIVER'S NAME: J&J Trucking- [redacted] (b)(6)

NAME OF AUCTION/MARKET: Southwest Livestock

CONSIGNOR (OWNER/SHIPPER) NAME: Dennis Chavez

CONSIGNEE (RECEIVER/DESTINATION) NAME: [redacted] (b)(6)

STREET ADDRESS: 24 Dalies Rd

STREET ADDRESS: [redacted] (b)(6) 7741 Col. Independencia 2

CITY, STATE, ZIP CODE: Los Lunas, nm 87031

CITY, STATE, ZIP CODE: Juarez, Chihuaha mx

AREA CODE & TELEPHONE NO.: 505-865-4600

AREA CODE & TELEPHONE NO.: 6656-301-1056

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- [x] Pregnant mares are not likely to foal (give birth) during the trip.
- [x] Horses are able to bear weight on all 4 limbs.
- [x] Foals are older than 6 months of age.
- [x] Horses are not blind in both eyes.
- [x] Horses are able to walk unassisted.

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USFH	1501						SR		/						/	1643869	
2		02		/						/				/			559381	
3		03		/						/						/	583838	
4		04						SR		/						/	610773	
5		05						roan		/				/			550526	
6		06				/				/				/			1646799	
7		07						roan		/						/	1637696	
8		08				/				/						/	578522	
9		09				/				/						/	587260	
10		10	/							/				/			610548	
11		12						SR		/						/	610597	
12		13		/						/				/			559731	
13		14	/							/				/			635371	
14		15						dun		/				/			600490	
15		16						roan		/						/	557809	

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMME[redacted]

SIGNATURE [redacted] (b)(6)

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNAT[redacted]ntained in this form is true and correct to the best [redacted] (b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

number for this information collection is 0579-0160. This time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

APPROVED OMB NO. 0579-0160

10-NN-016

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	1517		/						/				/			600410	
17		18	/							/				/			586130	
18		19						SR		/				/			560857	
19		20				/				/						/	6571606	
20		21		/						/				/			585675	
21		22				/				/				/			610974	
22		23			/					/				/			560139	
23		24						SR		/				/			584180	
24		25				/				/				/			551283	
25		26	/							/						/	549446	
26		27						dun		/				/			560804	
27		28			/					/				/			598449	
28		30		/						/				/			588178	
29		31						dun		/				/			583517	
30		32	/							/				/			614419	
31		33		/						/				/			651037	
32		34						dun		/				/			585507	
33		35						SR		/			mule			/	6136065	
34		36		/						/				/			647192	
35		37				/				/				/			594630	
36		38	/							/						/	583903	
37		39		/						/				/			599569	
38		40				/				/				/			610398	
39		41	/							/				/			339488	
40		42						SR		/				/			615973	
41		43						dun		/						/	516756	
42		44				/				/				/			637160	
43		45						b.skin		/				/			655827	
44		47						SR		/						/	645948	
45		49	/							/				/			565210	

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SIGNATURE OF OWNER/SHIPPER(I certify th[redacted] the best of my knowledge.)

(b)(6)

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB NO 0579-0160

10-NN-016

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	1550						roan		/				/			4B13355315	
17		51		/						/						/	600115	
18		52						roan		/				/			6046103	
19		53				/				/				/			549188	
20		54			/					/						/	600791	
21		55				/				/						/	368943	
22		57	/							/				/			6350068	
23		58		/						/						/	588741	
24		59				/				/						/	608498	
25		60	/							/						/	6466603	
26		61				/				/				/			329454	
27		62						SR		/				/			554518	
28		63						SR		/						/	551927	
29		64	/							/				/			587362	
30		65		/						/						/	6466194	
31		66						SR		/						/	593745	
32		67			/					/				/			6106607	
33		68						SR		/				/			599993	
34		70		/						/				/			611916	
35		71				/				/				/			471519	
36		73						SR		/						/	598493	
37		74	/							/				/			586085	
38		75						palo		/				/			642828	
39		76						SR		/				/			645343	
40		77	/							/				/			588201	
41		78						dun		/				/			6566614	
42		79	/							/						/	610313	
43		80	/							/				/			612919	
44		81						SR		/				/			6666015	
45		82	/							/				/			651514	

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SIGNATURE OF OWNER/SHIPPER(I certify t[redacted] the best of my knowledge.)

(b)(6)

VS FORM 10-13A
(SEP 2002)

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

APPROVED
OMB NO.
0579-0160

10-NN-016

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	1583						SR					mule			/	585535	
17		84						SR		/				/			6472116	
18		86		/						/						/	5666448	
19		87			/					/				/			635594	
20		88						OPP		/						/	592840	
21		89		/						/				/			611872	
22		90	/							/				/			612414	
23		91						SR		/						/	588323	
24		92		/						/				/			588515	
25		94						SR		/				/			5666611	
26		95				/				/				/			549670	
27		97				/				/				/			5652664	
28		98		/						/				/			637727	
29		99		/						/						/	650012	
30		1600	/							/						/	649470	
31		01			/					/						/	661324	
32		02						OUN		/				/			5600061	
33		03		/						/				/			611096	
34		04			/					/				/			592264	
35		05						SR		/						/	560540	
36		06						SR		/				/			611093	
37		07						SR		/				/			614213	
38		08	/							/				/			5666367	
39		09				/				/				/			579790	
40		10				/				/				/			561213	
41		11	/							/						/	594394	
42		12						SR		/				/			560582	
43		13		/						/				/			6457763	
44		14				/				/						/	588575	
45	↓	15						SR		/						/	592389	

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the in [redacted] the best of my knowledge.)

(b)(6)

VS FORM 10-13A
(SEP 2002)

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

APPROVED OMB NO. 0579-0160

10-NN-016

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFH	16116						SR		/				/			6446795	
17		17						dun		/				/			560448	
18		18						SR		/				/			550733	
19		19						SR		/				/			561319	
20		20						app		/						/	649081	
21		21	/							/						/	613065	
22		23		/						/				/			611575	
23		24		/						/				/			561779	
24		25						app		/						/	655850	
25		26	/							/						/	647838	
26		27						dun		/				/			592150	
27		28	/							/				/			592859	
28		29		/						/						/	649781	
29		30		/						/				/			649345	
30		31						palo		/				/			647220	
31		32						SR		/				/			592487	
32		33		/						/						/	643066	
33		34						SR		/				/			547728	
34		35						palo		/				/			647082	
35		36						SR		/						/	648972	
36		37						SR		/				/			644440	
37		38	/							/						/	594328	
38		39		/						/				/			611518	
39		40	/							/				/			650680	
40		41	/							/				/			593172	
41		42	/							/				/			592449	
42		43				/				/						/	561588	
43		45					/			/						/	593587	
44		46						SR		/				/			611780	
45		47						pan		/				/			594819	

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SIGNATURE OF OWNER/SHIPPER(I certify that the in [redacted] best of my knowledge.)

(b)(6)

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

Number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB NO
0579-0160

10-NM-016

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16		1648						SR		/						/	5600847	
17		49						SR		/			mule			/	1650575	
18		50				/				/				/			5936007	
19		51		/						/				/			1049590	
20		52	/							/						/	593495	
21		53	/							/				/			1047858	
22		55	/							/						/	1046394	
23		56	/							/				/			586854	
24		57						SR		/						/	1656258	
25		58			/					/				/			1666296	
26		59	/							/						/	550278	
27		9720	/						/							/	478764	
28																		
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SIGNATURE OF OWNER/SHIPPE [redacted] ue and correct to the best of my knowledge.)

(b)(6)

10-NN-016

Veterinary Services

National Center for
Import and Export

(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

WFH

INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED FROM THE UNITED STATES OF AMERICA TO MEXICO

CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: *México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchideos.*

1. Name and Address of Exporter: *Nombre y Dirección del Exportador:* Dennis Chavez
   24 Dalies Rd
   Los Lunas,NM 87031
2. Name and Address of Importer: *Nombre y Dirección del Importador:* [redacted] (b)(6) [redacted] (b)(6) 7741,Col.Independencia 2
   Juarez,Chihuaha MX
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
643869	Gelding	7	559381	Mare	6
583838	Gelding	5	610773	Gelding	5
550526	Mare	4	646799	Mare	4
637696	Gelding	8	578522	Gelding	8
587260	Gelding	4	610548	Mare	6
610597	Gelding	7	559731	Mare	9
635371	Mare	9	600490	Mare	7
557809	Gelding	4	600410	Mare	6
586130	Mare	9	560857	Mare	8
657166	Gelding	5	585675	Mare	5
610974	Mare	8	566139	Mare	6
584180	Mare	5	551283	Mare	5
549446	Gelding	9	560804	Mare	7
598449	Mare	7	588178	Mare	9
583517	Mare	5	614419	Mare	6
651037	Mare	5	585507	Mare	9

Veterinary Services

National Center for Import and Export

(Valid only if the USDA Veterinary Seal Appears over the Certificate Number) 10-NN-016

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
613665	Gelding	7	647192	Mare	7
594630	Mare	5	583903	Gelding	8
599569	Mare	4	610398	Mare	6
339488	Mare	7	615973	Mare	8
516756	Gelding	6	637160	Mare	6
655827	Mare	5	645948	Gelding	6
565210	Mare	9	4B13355315	Mare	7
600115	Gelding	5	646103	Mare	5
549188	Mare	7	600791	Gelding	6
368943	Gelding	5	635068	Mare	7
588741	Gelding	4	608498	Gelding	9
646603	Gelding	8	329454	Mare	5
554518	Mare	7	551927	Gelding	7
587362	Mare	6	646194	Gelding	6
593745	Gelding	6	610607	Mare	8
599993	Mare	8	611916	Mare	5
471519	Mare	7	598493	Gelding	7
586085	Mare	6	642828	Mare	9
645343	Mare	4	588201	Mare	5
656614	Mare	9	610313	Gelding	6
612919	Mare	4	666015	Mare	7
651514	Mare	7	585535	Gelding	5
647216	Mare	5	566448	Gelding	9
635594	Mare	8	592840	Gelding	6
611872	Mare	3	612414	Mare	5
558323	Gelding	4	588515	Mare	7
566611	Mare	5	549670	Mare	5
565264	Mare	8	637727	Mare	9
650012	Gelding	6	649470	Gelding	7
661324	Gelding	7	560061	Mare	9
611096	Mare	8	592264	Mare	6
560540	Gelding	5	611093	Mare	6
614213	Mare	5	566367	Mare	7
579790	Mare	5	561213	Mare	6
594394	Gelding	4	560582	Mare	8
645763	Mare	7	588575	Gelding	7
592389	Gelding	5	646795	Mare	5
560448	Mare	9	550733	Mare	9
561319	Mare	5	649081	Gelding	6
613065	Gelding	6	611575	Mare	5

USDA

Veterinary Services

National Center for Import and Export

10-NM-016

(Valid only if the USDA Veterinary Seal Appears over the Certificate Number)

WFH

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
561779	Mare	6	655850	Gelding	5
647838	Gelding	7	592150	Mare	8
592859	Mare	8	649781	Gelding	9
649345	Mare	5	647220	Mare	7
592487	Mare	7	643066	Gelding	6
547728	Mare	5	647082	Mare	9
648972	Gelding	8	644440	Mare	5
594328	Gelding	5	611518	Mare	5
650680	Mare	5	593172	Mare	8
592449	Mare	6	561588	Gelding	9
593587	Gelding	5	611780	Mare	5
594819	Mare	7	560847	Gelding	9
650575	Gelding	4	593607	Mare	7
649590	Mare	5	593495	Gelding	5
647858	Mare	6	646394	Gelding	5
586854	Mare	8	656258	Gelding	7
666296	Mare	4	550278	Gelding	5
478764	Gelding	6			

USDA

Veterinary Services

National Center for
Import and Export

Health Certificate No. 10-NM-016
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

WFH

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*

CERTIFICATION STATEMENTS / *CERTIFICACIONES*

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / *Fecha de inspección* April 15th 2010

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

10-NM-016

WFH

National Center for
Import and Export

(Delete as appropriate /*Remueva lo que no aplique)*

5.

[Within 5 days prior to export, the animals were dipped in coumaphos at 400 ppm. Spraying of the product is only authorized using a motor pump with coumaphos at 400 ppm.]
(NOM-019-ZOO-1994)] 4/10/2010 CY

[Los animales fueron tratados dentro de los 5 días previos al embarque con un baño de inmersión con coumaphos a concentración de 400 ppm. Solamente se autoriza el baño de aspersión cuando se utilice bomba de motor y se aplique una dosis de 400 ppm de coumaphos]
(NOM-019-ZOO-1994)] 4/10/2010 CY

C.Y Brasmer
Name of Accredited Veterinarian
Nombre del Médico Veterinario Acreditado

Walter F. Howe
Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario Federal que endosa.

CY 4/15/2010
Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado y Fecha

4/16/2010
Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario que endosa

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).*

USDA

Veterinary Services

National Center for Import and Export

Health Certificate No. 10-NN-016
(Valid only if the USDA Vetesinary Seal Appears over the Certificate Number)

WFH

AFFIDAVIT
DECLARACIÓN JURADA

I, Dennis Chavez declare that, to my best knowledge horses included in this shipment and accompanied by the health certificate # 10-NN-016 have not been fed or treated within the last one hundred and eighty days (180) prior to shipment with the fo compounds, plants or drugs.

Por este medio declaro que a mi saber y entender los caballos en este embarque, acompañados por el certificado sanitario número 10-NN-016 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta (180) días a del embarque.

1. Aristolochia spp and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (included furazolidone), ronidazol.
   Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incuding furazolidona) y rodinazole.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol and raptopamine. All animals are free of steroids.
   Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol y raptopamina. Asi como esteroids anabolicos.

3. The following thyrosthatics substances were not used: thiouracil, methylthiouracil phenylthiouracil and propylthiouracil.
   Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

[redacted] (b)(6)

Date and signature of the exporter 4/15/2010
Fecha y firma del exportador

Date and signature of the Notary Public 4/15/2010
Fecha y firma del Notario Publico

OFFICIAL SEAL
Joan Chavez
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires: 11/27/11

Mexico, Slaughter horse HC

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NM-018

TIME HORSES LOADED ON CONVEYANCE: 8:00am

DATE: 4-27-10

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE: Los Lunas, New Mexico

VEHICLE LICENSE NO. AND DRIVER'S NAME: J&J Trucking- [redacted]

NAME OF AUCTION/MARKET: Southwest Livestock

CONSIGNOR (OWNER/SHIPPER) NAME: Dennis Chavez

[redacted]

STREET ADDRESS: 24 Dalies Rd

STREET ADDRESS: [redacted] 7741 Col. Independencia 2

CITY, STATE, ZIP CODE: Los Lunas, nm 87031

CITY, STATE, ZIP CODE: Juarez, Chihuaha mx

AREA CODE & TELEPHONE NO.: 505-865-4600

AREA CODE & TELEPHONE NO.: 915-252-6614

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- [x] Pregnant mares are not likely to foal (give birth) during the trip.
- [x] Horses are able to bear weight on all 4 limbs.
- [x] Foals are older than 6 months of age.
- [x] Horses are not blind in both eyes.
- [x] Horses are able to walk unassisted.

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USER	1901				/				/						/	608938	
2		02			/					/			mule	/			550597	
3		03						se		/						/	645149	
4		04	/							/						/	580588	
5		05		/						/						/	563208	
6		06						roan		/				/			599945	
7		07	/							/				/			609567	
8		08						bstn		/						/	644973	
9		09						se		/						/	580015	
10		10				/				/						/	612649	
11		11	/							/						/	579295	
12		12	/							/						/	647408	
13		13			/					/				/			558944	
14		14						palo		/				/			457819	
15		15	/							/				/			607505	

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

SIGNATURE [redacted]

I HEREBY AU[redacted] THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my [redacted]

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NN-01 8

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USER	1916		/						/						/	588689	
17		17						SR		/				/			608842	
18		18	/							/				/			550474	
19		19		/						/				/			609769	
20		20						SR		/				/			550260	
21		21	/							/				/			610233	
22		22						roan		/						/	609832	
23		23	/							/				/			645288	
24		24			/					/				/			567673	
25		25	/							/						/	612887	
26		26						palo		/						/	584741	
27		27			/					/						/	607487	
28		28				/				/						/	312782	
29		29						roan		/						/	559048	
30		30						roan		/						/	649665	
31		31						SR		/						/	549439	
32		32		/						/						/	609631	
33		33						SR		/						/	581960	
34		34				/				/						/	348356	
35		35				/				/						/	588256	
36		36						roan		/				/			551030	
37		37						dun		/				/			585301	
38		38						SR		/						/	571082	
39		39						SR		/						/	565192	
40		40						SR		/						/	613558	
41		41	/							/						/	609907	
42		42						SR		/						/	645988	
43		43	/							/						/	614146	
44		44			/					/				/			612014	
45		45						SR		/				/			549127	

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SIGNATURE OF OWNER/SHIPPER(I ce [redacted] to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NM-018

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USER	1946	/							/						/	608221	
17		47	/							/						/	578295	
18		48	/							/				/			559602	
19		49						SR		/				/			578467	
20		50				/				/						/	609857	
21		51		/						/			mule	/			607596	
22		52	/							/				/			580092	
23		53					/			/				/			644928	
24		54	/							/				/			650450	
25		55	/							/				/			557893	
26		56				/				/				/			607751	
27		57						SR		/						/	612357	
28		58	/							/						/	609250	
29		59				/				/				/			599690	
30		60	/							/				/			599306	
31		61						SR		/				/			588093	
32		62	/							/						/	578980	
33		63		/						/				/			599541	
34		64				/				/						/	579631	
35		65						SR		/						/	609893	
36		66	/							/				/			599285	
37		67	/							/				/			566428	
38		68		/						/						/	588450	
39		69	/							/						/	578101	
40		70						POLO		/				/			584065	
41		71		/						/						/	650744	
42		72			/					/						/	599037	
43		73						SR		/						/	578938	
44		74			/					/						/	551120	
45		75						SR		/				/			645068	

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SIGNATURE OF OWNER/SHIPPER(I cert [redacted] nd correct to the best of my knowledge.)

(b)(6)

VS FORM 10-13A

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NM-018

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	1976		/						/						/	598370	
17		77						bsin		/						/	645033	
18		78	/							/				/			585573	
19		79						SR		/				/			566177	
20		80	/							/				/			579891	
21		81						SR		/						/	591916	
22		82						SR		/						/	585212	
23		83				/				/						/	648298	
24		84	/							/				/			577536	
25		85						SR		/				/			608071	
26		86		/						/				/			649458	
27		87	/							/						/	646315	
28		88	/							/				/			561043	
29		89				/				/				/			643413	
30		90	/							/						/	614556	
31		91						roan		/						/	598447	
32		92						palo		/						/	612692	
33		93	/							/				/			615224	
34		94						SR		/				/			611298	
35		95			/					/						/	637714	
36		96		/						/				/			655199	
37		97	/							/				/			650517	
38		98						SR		/						/	651678	
39		99				/				/						/	646182	
40		2000						SR		/				/			565529	
41	USFG	7951	/							/				/			644142	
42		52						SR		/						/	599475	
43		53						SR		/						/	645101	
44		54			/					/				/			559375	
45		55		/						/				/			607710	

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SIGNATURE OF OWNER/SHIPPER(I certify [redacted] correct to the best of my knowledge.)

(b)(6)

VS FORM 10-13A
(SEP 2002)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED
OMB NO.
0579-0160

10-NM-018

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	7956		/						/				/			551141	
17		57						dun		/						/	647868	
18		58						roan		/				/			549063	
19		59			/					/						/	588454	
20		60						roan		/						/	643722	
21		61						SR		/						/	551319	
22		62						palin		/				/			607844	
23		63			/					/						/	559123	
24		64						SR		/				/			578589	
25		65						SR		/				/			651511	
26		66			/					/				/			549467	
27		67	/							/						/	558258	
28		68						SR		/			mule	/			608217	
29		69						app		/				/			650875	
30		70				/				/						/	549804	
31		71	/							/				/			551019	
32		72	/							/				/			557828	
33		73				/				/						/	646035	
34		74			/					/			mule			/	574575	
35		75			/					/				/			611978	
36		76						palo		/						/	615144	
37		77		/						/				/			453751	
38		78						SR		/				/			586166	
39		79						palo		/						/	610062	
40		80						SR		/						/	600930	
41		81						palo		/				/			549017	
42		82		/						/				/			586890	
43		83			/					/						/	599129	
44		84		/						/				/			579828	
45		85		/						/				/			608354	

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SIGNATURE OF OWNER/SHIPPER(I c[redacted]ct to the best of my knowledge.)

[redacted]

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NM-018

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	7986						SR		/				/			583595	
17		87		/						/				/			549076	
18		88			/					/						/	612780	
19		89	/							/						/	459617	
20		90						app		/				/			551457	
21		91				/				/				/			567380	
22		92	/							/						/	607580	
23		93						SR		/				/			331819	
24		94						app		/						/	586850	
25		95						SR		/				/			650853	
26		96						app		/						/	551891	
27		97				/				/						/	608956	
28		98				/				/				/			580044	
29		99	/							/				/			651476	
30		8000						pdan		/						/	584540	
31																		
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SIGNATURE OF OWNER/SHIP [redacted] e and correct to the best of my knowledge.)

(b)(6)

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10-NM-018
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

YFH

INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED FROM THE UNITED STATES OF AMERICA TO MEXICO

CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: *México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchideos.*

1. Name and Address of Exporter: Dennis Chavez
   Nombre y Dirección del Exportador: 24 Dalies Rd
   Los Lunas,NM 87031
2. Name and Address of Importer: [redacted] (b)(6)
   Nombre y Dirección del Importador: [redacted] (b)(6) 7741 Col.Independencia 2
   Juarez,Chihuaha MX
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
608938	Gelding	6	550597	Mare	8
645149	Gelding	7	580588	Gelding	7
563208	Gelding	4	599945	Mare	5
609567	Mare	8	644973	Gelding	4
580015	Gelding	6	612649	Gelding	6
579295	Gelding	4	647408	Gelding	5
558944	Mare	7	457819	Mare	7
607505	Mare	4	588689	Gelding	6
608842	Mare	4	550474	Mare	6
609769	Mare	8	550260	Mare	7
610233	Mare	6	609832	Gelding	4
645288	Mare	7	567673	Mare	8
612887	Gelding	4	584741	Gelding	9
607487	Gelding	5	312782	Gelding	6
559048	Gelding	5	649665	Gelding	9
549439	Gelding	8	609631	Gelding	8

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VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10-NN-018
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WFH

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
586960	Gelding	6	348356	Gelding	7
588256	Gelding	4	551030	Mare	5
585301	Mare	8	571082	Gelding	8
565192	Gelding	5	613558	Gelding	4
609907	Gelding	7	645988	Gelding	8
614146	Gelding	5	612014	Mare	6
549127	Mare	6	608221	Gelding	5
578295	Gelding	5	559602	Mare	7
578467	Mare	7	609857	Gelding	5
607596	Mare	4	580092	Mare	7
644928	Mare	6	650450	Mare	8
557893	Mare	9	607751	Mare	7
612357	Gelding	7	609250	Gelding	7
599690	Mare	8	599306	Mare	9
588093	Mare	5	578980	Gelding	7
599541	Mare	7	579631	Gelding	5
609893	Gelding	4	599285	Mare	6
566428	Mare	8	588450	Gelding	7
578101	Gelding	7	584065	Mare	5
650744	Gelding	4	599037	Gelding	8
578938	Gelding	5	551120	Gelding	6
645068	Mare	5	598370	Gelding	7
645033	Gelding	8	585573	Mare	6
566177	Mare	5	579891	Mare	5
591916	Gelding	7	585212	Gelding	9
648298	Gelding	5	577536	Mare	4
608071	Mare	4	649458	Mare	7
646315	Gelding	8	561043	Mare	5
643413	Mare	4	614556	Gelding	6
598447	Gelding	4	612692	Gelding	9
615224	Mare	7	611298	Mare	7
637714	Gelding	6	655199	Mare	6
650517	Mare	8	651678	Gelding	9
646182	Gelding	5	565529	Mare	5
644142	Mare	7	599475	Gelding	5
645101	Gelding	5	559375	Mare	8
607710	Mare	6	551141	Mare	6
647868	Gelding	4	549063	Mare	6
588454	Gelding	7	643722	Gelding	6
551319	Gelding	4	607844	Mare	5

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Veterinary Services

National Center for Import and Export

Health Certificate No. 10-NM-018
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WFH

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
559123	Gelding	5	578589	Mare	6
651511	Mare	7	549467	Mare	5
558258	Gelding	4	608217	Mare	7
650875	Mare	9	549804	Gelding	9
551019	Mare	6	557828	Mare	6
646035	Gelding	4	574575	Gelding	9
611978	Mare	7	615144	Gelding	8
453751	Mare	4	586166	Mare	7
610062	Gelding	8	600930	Gelding	8
549017	Mare	5	586890	Mare	5
599129	Gelding	5	579828	Mare	6
608354	Mare	8	583595	Mare	8
549076	Mare	7	612780	Gelding	7
459617	Gelding	4	551457	Mare	5
567380	Mare	8	607580	Gelding	7
331819	Mare	6	586850	Gelding	8
650853	Mare	5	551891	Gelding	5
608956	Gelding	7	580044	Mare	7
651476	Mare	6	584540	Gelding	6

USDA

VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 10-NM-018
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WFH

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*

CERTIFICATION STATEMENTS / *CERTIFICACIONES*

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / *Fecha de inspección* April 27th 2010

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

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Veterinary Services

National Center for Import and Export

Health Certificate No. 10-NM-018
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WFH

(Delete as appropriate /*Remueva lo que no aplique)*

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.][

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.][*

C.Y Brasmer
Name of Accredited Veterinarian
Nombre del Médico Veterinario Acreditado

Walter E. Howe
Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario Federal que endosa.

4/27/2010
Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado y Fecha

4/27/2010
Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario que endosa y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).*

USDA

Veterinary Services

National center for
Import and Export

Health Certificate No. 10-NM-018
(Valid only if the USDA Veterinary Seal
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AFFIDAVIT
DECLARACIÓN JURADA

I (print) Dennis Chavez declare that the horses included in this shipment have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.
Por este medio declaro que los caballos en este embarque no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.
Aristolochia spp *y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.*

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.
Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter [redacted] 4/27/2010
Fecha y firma del exportador

(b)(6)

Date and signature of the Notary Public 4/27/2010
Fecha y firma del Notario Público

OFFICIAL SEAL
Jarod Colbert
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires: 4/12/14

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NM-001

TIME HORSES LOADED ON CONVEYANCE: 6:00am

DATE: 1-21-10

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE: Las Lunas, New Mexico

VEHICLE LICENSE NO. AND DRIVER'S NAME: J&J Trucking J&J Trucking [redacted]

NAME OF AUCTION/MARKET: Southwest Livestock.

CONSIGNOR (OWNER/SHIPPER) NAME: Dennis Chavez

CONSIGNEE (RECEIVER/DESTINATION) NAME: [redacted]

STREET ADDRESS: 24 Dalies Rd

STREET ADDRESS: Carnicos de Jerez.

CITY, STATE, ZIP CODE: Las Lunas, NM 87031

CITY, STATE, ZIP CODE: Jerez, Zacatecas, 99380

AREA CODE & TELEPHONE NO.: 505-865-4600

AREA CODE & TELEPHONE NO.: 494-945-2828

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- [x] Pregnant mares are not likely to foal (give birth) during the trip.
- [x] Horses are able to bear weight on all 4 limbs.
- [x] Foals are older than 6 months of age.
- [x] Horses are not blind in both eyes.
- [x] Horses are able to walk unassisted.

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USFG	9301						SR		/				/			985170000363687	
2		02						SR		/				/			355201	
3		03						roan		/				/			379368	
4		04				/				/				/			360977	
5		05						SR		/				/			354005	
6		06		/						/						/	356047	
7		07						SR		/				/			360619	
8		08	/							/				/			356495	
9		09						SR		/				/			359708	
10		10						SR		/				/			377371	
11		11						brown		/				/			351999	
12		12	/							/				/			379485	
13		13					/			/				/			367427	
14		14	/							/						/	358317	
15		15	/							/				/			363103	

HORSES HAV[redacted]IMUM OF 6 CONSECUTIVE HOURS IMME[redacted]

SIGNATURE [redacted]

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN $10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER/I certify that the information contained in this form is true and correct to the best o[redacted]

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

Previous editions are obsolete

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NM-001

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16		9316						SR		/						/	360510	
17		17						SR		/						/	362276	
18		18	/							/						/	357831	
19		19						bskin		/				/			362115	
20		20	/							/				/			359632	
21		21	/							/				/			375860	
22		22	/							/						/	335938	
23		23	/							/						/	333977	
24		24	/							/						/	514861	
25		25	/							/				/			375369	
26		26			/					/						/	382638	
27		27	/							/				/			358844	
28		28						bskin		/				/			343478	
29		29						SR		/						/	376910	
30		30						SR		/				/			337009	
31		31						SR		/				/			4532268	
32		32				/				/						/	337913	
33		33						SR					MULE			/	337329	
34		34						bskin		/				/			334608	
35		35					/			/				/			361143	
36		36						bskin		/				/			540907	
37		37			/					/				/			451635	
38		38						SR		/				/			459337	
39		39				/				/						/	470711	
40		40	/							/				/			457784	
41		41						bskin		/				/			447258	
42		42	/							/				/			447215	
43		43	/							/						/	456568	
44		44	/							/				/			359362	
45		45	/							/				/			545862	

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SIGNATURE OF OWNER/SHIPP[redacted]rect to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NM-001

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9346						bskn		/				/			517214	
17		47						roan		/				/			575437	
18		48						SR		/				/			576074	
19		49	/							/						/	573979	
20		50						bskn		/				/			476053	
21		51	/							/			mule			/	453423	
22		52						bskn		/						/	455993	
23		53						SR		/				/			577505	
24		54						SR		/				/			473241	
25		55						SR		/			mule	/			576960	
26		56	/							/				/			562845	
27		57						SR		/						/	454189	
28		58			/					/						/	515791	
29		59						SR		/						/	516349	
30		60						SR		/				/			474692	
31		61						SR		/						/	540592	
32		62	/							/				/			576032	
33		63	/							/				/			575167	
34		64	/							/				/			545636	
35		65		/						/				/			461097	
36		66	/							/						/	473319	
37		67	/							/						/	454208	
38		68				/				/						/	464237	
39		69	/							/						/	462476	
40		70	/							/				/			458954	
41		71	/							/						/	453818	
42		72	/							/				/			455373	
43		73	/							/				/			576485	
44		74						SR		/						/	577033	
45		75						SR		/				/			541319	

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SIGNATURE OF OWNER/SH[redacted] is true and correct to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-NM-001

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	15FG	93746				/				/				/			573755	
17		77				/				/				/			575318	
18		78			/					/						/	575347	
19		79						SR		/				/			575463	
20		80			/					/						/	574904	
21		81			/					/						/	574963	
22		82	/							/				/			574701	
23		83	/							/						/	574957	
24		84	/							/				/			576351	
25		85						SR		/				/			562418	
26		86						bskin		/						/	458401	
27		87			/					/				/			576070	
28		88						bskin		/				/			542058	
29		89	/							/				/			562140	
30		90				/				/						/	454151	
31		91	/							/				/			576891	
32		92						bskin		/						/	576600	
33		93						SR		/						/	458680	
34		94						OPP		/						/	575858	
35		95						OPP		/				/			452225	
36		96						OPP		/				/			544883	
37		97						SR		/						/	546200	
38		98						SR		/						/	455008	
39		99	/							/				/			576679	
40		9400	/							/						/	574579	
41		01						SR		/				/			474585	
42		02						SR		/						/	577409	
43		03	/							/						/	574718	
44		04				/				/				/			574488	
45		05		/						/						/	516788	

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SIGNATURE OF OWNER/SHIPPER(I [redacted] ect to the best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED
OMB NO.
0579-0160

10-NN-001

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16		9400						SR		/				/			454497	
17		07		/						/				/			472050	
18		08	/										mule			/	449222	
19		09						SR		/						/	474803	
20		10	/							/				/			545512	
21		11						SR		/				/			504110	
22		12						pcco		/				/			453162	
23		13	/							/				/			542313	
24		14		/						/				/			475429	
25		15						SR		/				/			545600	
26		16				/				/						/	575026	
27		17	/							/				/			504697	
28		18						SR		/				/			562079	
29		19	/							/				/			517972	
30		20	/							/				/			517127	
31		21		/						/				/			475509	
32		22						SR		/				/			576262	
33		23						bskin		/						/	576956	
34		24	/							/						/	545858	
35		25						bskin		/						/	576302	
36		26	/							/				/			361917	
37		27						SR		/						/	470718	
38		28						SR		/						/	445518	
39		29						bskin		/				/			516318	
40		30						SR		/						/	562180	
41		31		/						/				/			455499	
42		32						SR		/				/			512782	
43		33	/							/				/			546000	
44		34						bskin		/				/			577292	
45		35			/					/				/			540472	

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SIGNATURE OF OWNER/SHIPPER(I cer[redacted]t to the best of my knowledge.)

[redacted]

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY (CONTINUATION SHEET)

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

10-N4.001

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFG	9436			/					/				/			564520	
17		37						SR		/				/			545074	
18		38						SR		/				/			563941	
19		39				/				/				/			574359	
20		40						Dskin		/						/	449580	
21		41				/				/						/	577174	
22		42						SR		/						/	457202	
23		43	/							/				/			575693	
24		44	/							/				/			449546	
25		45	/							/				/			540923	
26		46		/						/						/	575384	
27		47	/							/				/			475421	
28		48				/				/				/			541228	
29		49						SR		/				/			544869	
30		50						SR		/						/	454474	
31		51						SR		/				/			541922	
32		52	/							/						/	561921	
33		53						SR		/						/	545737	
34		54	/							/						/	572983	
35		55	/							/						/	575287	
36		56		/						/				/			455850	
37		57						Dskin		/						/	563333	
38		58	/							/				/			563677	
39		59		/						/						/	540346	
40		60						SR		/				/			577461	
41		61						SR		/						/	546173	
42		62		/						/						/	540597	
43		63	/							/				/			574765	
44		64	/							/				/			540908	
45		65	/							/						/	575190	

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SIGNATURE OF OWNER/SHIPPER(I ce[redacted]he best of my knowledge.)

(b)(6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)

(Please type or print in ink)

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FORM APPROVED OMB NO. 0579-0160

10-NN-001

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USFC	9466			/					/				/			451283	
17		67						SR		/						/	575131	
18		68						poxn		/						/	454012	
19		69	/							/						/	364382	
20		70		/				c		/				/			577024	
21		71						SR		/						/	450924	
22		72	/							/				/			455689	
23		73	/							/				/			447356	
24		74	/							/						/	455403	
25		75				/				/				/			457625	
26		76	/							/						/	454861	
27		77	/							/						/	455242	
28		78		/						/				/			452440	
29		79	/							/				/			449009	
30		80						SR		/						/	454346	
31		81	/					c		/						/	454059	
32		82						SR		/						/	512700	
33		83			/					/						/	455948	
34		84	/							/						/	516431	
35		85	/							/				/			457094	
36																		
37																		
38																		
39																		
40																		
41																		
42																		
43																		
44																		
45																		

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SIGNATURE OF OWNER/SHIPPER(I certify that th [redacted] t of my knowledge.)

(b)(6)

USDA

Veterinary Services

National Center for Import and Export

Health Certificate No. 10-NM-001
(Valid only if the USDA Veterinary Seal Appears over the Certificate Number)

INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED FROM THE UNITED STATES OF AMERICA TO MEXICO

CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: *México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.*

1. Name and Address of Exporter: / *Nombre y Dirección del Exportador:* Dennis Chavez
   24 Dalies Rd
   Los Lunas,NM 87031
2. Name and Address of Importer: / *Nombre y Dirección del Importador:* (b)(6)
   Carnicos De Jerez
   Jerez,Zacatecas MX
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
985170000363687	Mare	7	375866	Mare	7
355201	Mare	5	335938	Gelding	5
379368	Mare	4	333977	Gelding	8
360977	Mare	7	514861	Gelding	5
354005	Mare	9	375369	Mare	5
356047	Gelding	6	382638	Gelding	8
360619	Mare	8	358844	Mare	6
356495	Mare	6	343478	Mare	8
359708	Mare	9	376910	Gelding	4
377371	Mare	5	337009	Mare	7
351999	Mare	7	453268	Mare	5
379485	Mare	8	337913	Gelding	4
367427	Mare	6	337329	Gelding	6
358317	Gelding	5	334608	Mare	9
363103	Mare	5	361143	Mare	7
360510	Gelding	9	540907	Mare	4
362276	Gelding	5	451635	Mare	7
357831	Gelding	4	459337	Mare	5
362115	Mare	8	470711	Gelding	8
359632	Mare	6	457784	Mare	7

USDA

VS
Veterinary Services

National Center for
Import and Export

Health Certificate No. 10-NM-001
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
447258	Mare	7	562140	Mare	6
447215	Mare	5	454151	Gelding	7
456568	Gelding	6	576891	Mare	9
359362	Mare	8	576600	Gelding	5
545862	Mare	5	458680	Gelding	6
517214	Mare	5	575858	Gelding	7
575437	Mare	7	452225	Mare	6
576074	Mare	9	544883	Mare	9
573979	Gelding	6	546200	Gelding	7
476053	Mare	8	455008	Gelding	8
453423	Gelding	6	576679	Mare	5
455993	Gelding	5	574579	Gelding	6
577505	Mare	7	474585	Mare	7
473241	Mare	9	575409	Gelding	9
576960	Mare	6	574718	Mare	6
562845	Mare	6	574488	Mare	8
454189	Gelding	6	516788	Gelding	7
515791	Gelding	9	454497	Mare	7
516349	Gelding	6	472050	Mare	6
474692	Mare	5	449222	Gelding	9
540592	Gelding	7	474803	Gelding	7
576032	Mare	8	545512	Mare	8
575167	Mare	9	564110	Mare	6
545636	Mare	3	453162	Mare	7
461097	Mare	8	542313	Mare	9
473819	Gelding	9	475429	Mare	5
454208	Gelding	7	545600	Mare	7
464237	Gelding	8	575026	Gelding	5
462476	Gelding	5	564697	Mare	6
458954	Mare	7	562079	Mare	5
453818	Gelding	8	517972	Mare	7
455373	Mare	6	517127	Mare	4
576485	Mare	6	475509	Mare	8
577033	Gelding	7	576262	Mare	7
541319	Mare	8	576956	Gelding	4
573755	Mare	6	545858	Gelding	6
575318	Mare	8	576302	Gelding	6
575347	Gelding	4	361917	Mare	8
575463	Mare	7	470718	Gelding	9
574904	Gelding	6	448818	Gelding	7
574963	Gelding	8	576318	Mare	8
574701	Mare	7	562180	Gelding	6
574957	Gelding	8	455499	Mare	5
576351	Mare	5	512782	Mare	8
562418	Mare	5	546000	Mare	7
458401	Gelding	9	577292	Mare	9
576670	Mare	6	540472	Mare	6
542058	Mare	7	564520	Mare	8

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Microchip number / *Número de microchip*	Sex/*Sexo*	Approximate age/*Edad aproximada*	Microchip Number / *Número de microchip*	Sex / *Sexo*	Approximate age/ *Edad aproximada*
545674	Mare	6			
563941	Mare	7			
574259	Mare	9			
449580	Gelding	5			
577174	Gelding	6			
457202	Gelding	6			
575693	Mare	7			
449546	Mare	9			
540923	Mare	6			
575384	Gelding	8			
475421	Mare	5			
541228	Mare	7			
544869	Mare	6			
454474	Gelding	5			
541922	Mare	8			
561921	Gelding	5			
545737	Gelding	6			
572983	Gelding	7			
575287	Gelding	4			
455850	Mare	8			
563833	Gelding	6			
563677	Mare	7			
540846	Gelding	5			
577461	Mare	8			
546173	Gelding	5			
540597	Gelding	7			
574765	Mare	9			
540908	Mare	7			
575190	Gelding	5			
451283	Mare	6			
575131	Gelding	5			
454012	Gelding	6			
564382	Gelding	4			
577024	Mare	8			
450924	Gelding	7			
455689	Mare	6			
447356	mare	7			
455403	Gelding	5			
457625	Mare	5			
454861	Gelding	7			
455242	Gelding	9			
450440	Mare	7			
449009	Mare	6			
454346	Gelding	6			
454059	Gelding	4			
512700	Gelding	7			
455948	Gelding	4			
516431	Gelding	8			
457094	Mare	6			

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CERTIFICATION STATEMENTS / *CERTIFICACIONES*

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / *Fecha de inspección* January 21st 2010

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

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(Delete as appropriate /*Remueva lo que no aplique)*

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.][

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.][*

C.Y Brasmer
Name of Accredited Veterinarian
Nombre del Médico Veterinario Acreditado

Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario Federal que endosa.

1/21/2010
Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado y Fecha

Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario que endosa y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).*

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Veterinary Services

National Center for Import and Export

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AFFIDAVIT
DECLARACIÓN JURADA

I, Dennis Chavez declare that, to my best knowledge horses included in this shipment and accompanied by the health certificate # 10-NM-001 have not been fed or treated within the last one hundred and eighty days (180) prior to shipment with the followin compounds, plants or drugs.
Por este medio declaro que a mi saber y entender los caballos en este embarque, acompañados por el certificado sanitario número 10-NM-001 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta (180) días antes del embarque.

1. Aristolochia spp and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (included furazolidone), ronidazol.
Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incuding furazolidona) y rodinazole.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol and raptopamine.
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol y raptopamina.

3. The following thyrosthatics substances were not used: thiouracil, methylthiouracil phenylthiouracil and propylthiouracil.
Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the expor [redacted] 1-21-10
Fecha y firma del exportador

(b)(6)

Date and signature of the Notary Public 1-21-10
Fecha y firma del Notario Publico

OFFICIAL SEAL
Joan Chavez
NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires: 11/27/11

Mexico, Slaughter horse HC