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OMB APPROVED 0579-0332 Exp. Date 05/2024

## UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE **VETERINARY SERVICES**

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

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	 PREFIX		Bay	Grey	Black	Pinto	Chest- nut	Other	ТВ	QT	Draft	Pony	Other	Mare	Stall ion	Geld -ing	etc.	precondition

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 information contained in this form is true and correct to the best of my knowledge*.)