Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue		Certificate Number	
1. Consignor:		2. Consigne	ee:	Same
_				
3. Country Of Origin: USA		4. State Of	Origin:	
		0.701	D. M. M.	
5. Country Of Destination: State of Qatar			Destination: ***********************	******
		8. Port Of Er	nharkation.	
7. Place Of Origin:		6. POR OF E	nbarkation:	
9. Estimated Date Of Shipment:		10. Means O	f Transport:	
11. Port of Entry:			ermit Number: **************************	*******
13. Description Of Commodity:		14. Date of	Inspection:	
Horses				
15. Total Quantity:			nal Information: **************************	******
1				
17. Total Number Of Packages/Containers: ***********************************	*****	*****	******	******
18. Identification / Seal Numbers:	*****	*****	*****	*****
***********	*****	******	*******	******
19. Commodities Intended Use:		20 Tura 0	f Adminaian.	
**************************************	******		f Admission: anent	
21. Identification Of Commodities:				
21. Identification of commodities.				
Name				
Breed				
Age				
Sex Color				
Microchip Number OR Attach	Silhouette			
OR Attach Photographs	222000000			



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

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Certification Statements:

- I, the undersigned USDA accredited veterinarian, certify that the animal described above meets the following requirements:
- 1. The United States of America is free of African Horse Sickness (has not occurred in at least 2 years prior to export and the horse has not been vaccinated against the disease), Glanders (has not occurred in at least 6 months prior to export), Dourine (has not occurred in at least 6 months prior to export), and Venezuelan Equine Encephalitis (has not occurred in at least 2 years prior to export).
- 2. The horse comes from a country where the following diseases are compulsorily notifiable: African Horse Sickness, Dourine, Glanders, Equine Encephalomyelitis (of all types including Venezuelan Equine Encephalomyelitis - VEE), equine infectious anemia, vesicular stomatitis, rabies, and anthrax.
- 3. The horse came from a holding which was not subjected to quarantine for animal health reasons and the horse did not have any contact with equidae from a holding that was subjected to quarantine for animal health reasons. The horse came from a holding which is free of the following diseases:
 - a. Equine infectious anemia; if the disease occurred on the holding, the infected animals were euthanized and the remaining animals were tested by the agar gel immunodiffusion (Coggins) test on two occasions, 3 months apart, with negative results.
 - b. Equine encephalomyelitis; if the disease occurred on the holding, the quarantine period was 6 months from the date that the infected animals were euthanized.
 - c. Vesicular stomatitis; if the disease occurred on the holding, the quarantine period was 6 months.
 - d. Rabies; if the disease occurred on the holding, the quarantine period was 1 month from the last recorded case.
 - e. Anthrax; if the disease occurred on the holding, the quarantine period was 15 days from the last recorded case or if all the animals on the holding susceptible to the disease were euthanized and the premises was disinfected, the quarantine period was 30 days from the day on which the animals were destroyed and the premises was disinfected.
- 4. To the best of my knowledge, the horse has not been in contact with equidae suffering from an infectious or contagious disease in the 15 days prior to this declaration.
- 5. The horse has been isolated from equidae of lesser health status for at least 28 days prior to export.
- 6. The horse has been resident on a holding under veterinary supervision in the United States for 3 months prior to export.*

OR

The horse was legally imported into the United States and the veterinary health certificates issued by each country that the horse has been in during the 60 days prior to export are attached.*

- 7. The horse has been examined today and shows no clinical signs of disease (including vector-borne disease), is free from external parasites, and is fit for transportation.
- 8. The horse does not show any clinical signs of contagious equine metritis (CEM) and the horse come from a holding where there has not been any suspicion of CEM during the past 2 months prior to export and the horse has not had contact indirectly or directly through coitus with equidae infected or suspected of CEM.

SEPARIMENT OF
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N.C.S. SALL

Veterinary Authority

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			No manufacture
Certification Statements (continued):			
9. Within 30 days of export, the h results, by the agar gel immuno	_		with negative
Test Date:			
10. In the case of an uncastrated	male horse:		
Within 21 days of export, the results, by a serum neutraliza			with negative
Test Date:			
OR			
The horse was subjected between either with a negative result a second test showing a stable equine viral arteritis and regative manufacturer.*	; or with a positive re e or decreasing titer;	esult followed at least in and was immediately vac	14 days later b cinated against
OR			
The horse met the following rea. was isolated; and b. at least 7 days after comme arteritis on a blood sample with the c. was then immediately vaccind. was kept separate from other. was regularly revaccinated	encing isolation was su ith a negative result; nated; and er equids for 21 days f	and Following vaccination; and	nd
OR			
Within 6 months of export, ser arteritis, with negative resur- reaction (PCR) test.*			-
Test Date:			

11. During the 6 months prior to export, vesicular stomatitis has not occurred in the State of origin.*

OR

Within 21 days of export, the horse was tested for vesicular stomatitis, with negative results, by either virus neutralization (sera with values of 1/32 or greater are considered to be positive), or competitive enzyme-linked immunosorbent assay (C-ELISA), or complement fixation test.*

Toat	Date:	

SPARTMENT

Veterinary Authority
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Certification Statement	s (continued):
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 During the 60 days, but not less than 14 days, immediately prior to export, the horse received either a primary course of vaccination against Equine Influenza or a booster dose to a previously certified course of primary vaccination, in accordance with the manufacturer's recommendations. 		
Primary Date of Vaccine:		
Booster Date of Vaccine:		
*Delete as appropriate.		
**********	**************************************	
Name of Accredited Veterinarian	Name of USDA Veterinarian	
Signature of Accredited Veterinarian	Signature of USDA Veterinarian	
Date	Date	



Veterinary Authority

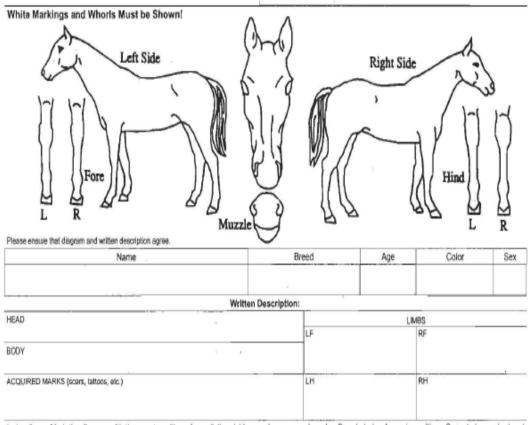
UNITED STATES DEPARTMENT OF AGRICULTURE

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Silhouette For Identification of Horses Without a Microchip Exported From the United States of America



Instructions: Mark the diagram with the exact position of any distinguishing marks, scars or brands. Brands to be drawn in position. Scars to be marked and indicated with an arrow (->). Stars or blazes on the face and any other markings to be drawn in on the diagrams showing position and shape as accurately as possible. Whorls should be marked with a cross (X). If no markings - this fact should be stated.