According to the Paperwork Reduction Act of 1995, as agency may not conduct or sponsor, and a person is not required to respond to, a cohection of information unless it displays a valid OMB control number. The valid OMB control numbers for these information collections are 0579-0020, 0036, 0048, 0101, 0156, 0278, and 0432. The trace required to complete these information collections is estimated to average 25 to 1.5 hours per response, including the trace for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB Approved 0579-0020, 0036, 0048, 0101, 0156, 0278, and 0432

RAKIMENT

# Veterinary Health Certificate for Export of Immediate Slaughter Horses from the United States of America to Canada

United states department of agriculture	January 17, 2019	9	VS-MT-19-CA-006-00045304						
1. Consignor: (b) (c), (b) (7)(C) (b) (6), (b) (7)(C)  MT (C)  United States		2. Consignee: Bouvry E Fort Mac Canada							
3. Country Of Origin: USA		4. State Of Ori	igin:						
5. Country Of Destination: Canada	Marie 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 - 1940 -	6. Zone Of Destination:							
7. Place Of Origin: (b) (6), (b) (7) (C)  (b) (6), (b) (7) MT (b) (6), (b) (7) (C)			barkation/Border Crossing: etgrass - Border Port						
9. Estimated Date Of Shipment: January 21, 2019		10. Means Of Truck	Fransport:						
11. ***********************************	**********	12. CITÉS Per		**********					
13. Description Of Commodity: Horses		14. Date Of Inc 1/16/201	pection: 9						
15. Total Quantity: 30		16. Additional (See atta	Information: ached Additional Information)						
17. Total Number Of Packages/Containers:	********	******	*********	******					
18. Identification / Seal Numbers:	****	*****	********	*****					
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Ad Permanen							
21. Identification Of Commodities:									
(See next page)									
**************************************	************************************	********** ******	**************************************	**************************************					
	Equine Welfare	Alliance							

Veterinary Authority Date Of Issue Certificate Number

UNITED STATES DEPARTMENT OF AGRICULTURE January 17, 2019 VS-MT-19-CA-006-00045304

16. Additional Information: Continued

All horses are branded -S on left shoulder

21. Identification	Of Commoditie	es: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	(b) (6), (b) (7)(C)	Chestrut	Quarter Horse	10 Years	Female	(b) (6), (b) (7)(C	blaze	None	None	coronet	Nor.e	coronet	
2		Sorrel	Quarter Horse	10 Years	Neutered Male		blaze	None	fetlock	fetlock	fetlock	fetlock	(b) (6), (b) (7) branded (C) shoulder
3		Red dun	Quarter Horse	10 Years	Female		star	None	None	None	fetlock	None	(b) (6), (b) (7)
4		Sorrel	Quarter Horse	10 Years	Female		blaze, lower lip	None	None	white to	fetlock	fetlock	branded (C) shoulder, (D) (6) (b) thigh
5		Grey	Quarter Horse	10 Years	Neutered Male		snip	None	pastern	pastern	pastern	None	(/)(C)
6		Bay	Quarter Horse	10 Years	Female		star	None	None	None	fetlock	fetlock	Quality or con-
7		Grullo	Quarter Horse	10 Years	Neutered Male		star, snip	None	None	None	fetlock	fetlock	÷
8		Bay	Quarter Horse	16 Years	Neutered Male		None	None	None	None	None	None	
9		Sorrel	Quarter Horse	10 Years	Female		star, strip, snip	None	None	None	fetlock	None	
10		Sorrel/ white	Paint	15 Years	Female		blaze, lower lip	None	white	white		iwhite to hind quarter	
11		Bay	Quarter Horse	10 Years	Female		None	None	None	None	None	None	
12		Chestnut	Quarter Horse	10 Years	Neutered Male		star	None	None	None	fetlock	fetlock	
13		Chestnut	Quarter Horse	10 Years	Female		star, strip, snip	None	None	None	coronet	None	
14		Bay/white	Appaloosa	10 Years	Female		None	None	None	None	None	None	
15		Sorrel	Quarter Horse	10 Years	Female		star, strip	None	None	None	None	None	
16		Sorrel	Quarter Horse	10 Years	Neutered Male		star	None	None	None	coronet	fetlock	
17		Bay-brown	Quarter Horse	10 Years	Neutered Male		star, strip,	None	fetlock	None	fetlock	fetlock	



Veterinary Authority Date Of Issue UNITED STATES DEPARTMENT OF AGRICULTURE

January 17, 2019 VS-MT-19-CA-006-00045304

Certificate Number



ow	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
	(h) (c) (h) (7)(o)	•				/b) /6) /b) /7)/C)	snip						
1.8	(b) (b), (b) (7)(C)	Black/	Paint	10 Years	Neutered	(b) (b), (b) (7)(C)	blaze,	None	white to	white to	fetlock	white to hind	
		white			Male		lower lip		knee	knee		quarter	
19		Bay	Quarter Horse	10 Years	Female		star, snip	None	None	None	None	None	
20		Brown	Quarter Horse	10 Years	Female		star, strip	None	None	None	None	None	
21		Bay	Quarter Horse	10 Years	Neutered Male		star, snip	None	None	None	encM	None	
22		Sorrel	Quarter Horse	10 Years	Female		star, snip	None	None	None	None	None	branded left shoulde
23		Chestnut/ white	Paint	10 Years	Female		bald face	None	None	None	coronet	None	
24		Bay	Quarter Horse	10 Years	Female		star	None	medial coronet	None	None	None	(b) (6) (b) (7\(C)
25		Grey	Quarter Horse	10 Years	Female		None	None	None	None	None	None	branded (b) (6), (b) (7)(C) shoulder
26		Red roan	Quarter Horse	10 Years	Female		star, strip,	None	None	None	coronet	None	
					-0.4		snip		××	N		Vene	
27		Bay-brown '	Quarter Horse	10 Years	Female		star, strip,	None	None	None	coronet	None	
							snip						
28		Bay/white	Paint	10 Years	Female		blaze,	None	white			nd white to hind	
							lower lip			onto body	quarter	quarter	(b) (6), (b) (7
29		Sorrel	Quarter Horse	10 Years	Neutered Male		star, strip,	None	fetlock	None	fetlock	fetlock	branded shoulder
30		Brown	Quarter Horse	10 Years	Neutered Male		None None	None	None	None	None	None	



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue

Certificate Number

LTURE January 17, 2019

VS-MT-19-CA-006-00045304



#### Certification Statements:

- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- 3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian Electronically Signed	Digitally Engorsed
Date	Date
January 17, 2019	January 17, 2019

According to the Paperwork Reduction Act of 1995, an agency may not conduct or spensor, and a person is not required to respond to, a collection of information unices it displays a valid OMB control number. The valid OMB control number is the control number of these information collections is estimated to average 25 to 1.5 hours per response, acknowing this time for reviewing instructions, searching cursing data sources, gathering and maritaning the data needed, and completing and travering the collection of information.

OMB Approved 0579-0020, 0036, 0046, 0101, 0156, 0278, and 0432

### Veterinary Health Certificate for Export of Immediate Slaughter Horses from the United States of America to Canada

Immediate Slaughter Hors	ses from the United	States of A	merica to Canada	
Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 23, 2019	.9	Certificate Number VS-MT-19-CA-006-00045449	
1.Consignor: (b)(6),(b)(7)(C) (b)(6),(b)(7)(C) MT (b)(6),(b)(7)(C) MT United States			ee: Exports acLeod, Alberta	ANNELS AND THE STATE OF THE STA
3. Country Of Origin: USA		4. State Of O Montana		
5. Country Of Destination: Canada	AMERICAN AND ADDRESS OF THE ADDRESS	6. Zone Of Do	estination:	************
7 (b) (6), (b) (7)(C) MT (b) (6), (b) (7)			mbarkation/Border Crossing: weetgrass – Border Port	THE PARTY OF THE P
9. Estimated Date Of Shipment: January 28, 2019		10. Means Of Truck	f Transport:	
11. + > 3 × 3 + + + + + + + + + + + + + + + + +		12. CITES Pe	ermit Number:	**********
13. Description Of Commodity: Horses		14. Date Of In		
15. Total Quantity: 30			alinformation: tached Additional Information)	
17. Total Number Of Packages/Containers:	**********	*******	*******	************
18. Identification / Seal Numbers:		· * * * * * * * * * * * * * * * * * * *		************
19. Commodities Intended Use: Immediate Slaughter		20. Type Of A	Admission: nt Import	
21. Identification Of Commodities:				
(See next page)	**********	***************************************		
************************************		**************************************	6 生命大声体表示 《《《文·文·文·文·》》《《文·文·》》《文·文·《文·》》《文·文·》》《文·文·》》《文·文·文·》》《文·文·文·》》《文·文·文·》 《《·文·文·》《《·文·》《《·文·》《《·文·》《《·文·》》《《·文·》》》	表有中华是有有中世世世纪(
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			L Marie	
	Equine We	lfare Alliance	4	
	<u></u>			

Date Of Issue Certificate Number

UNITED STATES DEPARTMENT OF AGRICULTURE January 23, 2019 VS-MT-19-CA-006-00045449

-00045449

16. Additional Information: Continued

Veterinary Authority

All horses are branded -S on left shoulder

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1.	(b) (6), (b) (7)(C)	Chestnut	Quarter Horse	6 Years	Female	(b) (b), (b) (7)(C)	blaze	None	None	None	white to	white to	
2		Sorrol.	Quarter Horse	18 Years	Neutered Male		star, strip, snip	None	None	None	None	None	
3		Зау	Quarter Horse	7 Years	Female		snip	None	None	None	None	None	
4		Sorrel	Quarter Horse	12 Years	Neutered Male		blase	мопе	fetlock	fetlock	fetlock	fetlock	branded (C) shoulder
5		Sorrel	Quarter Horse	10 Years	Neutered Male		star, strip, snip	None	None	fetlock	fetlock	fetlock	(b) (6), (b) (7) hip
б		Bay/white	Faint	18 Years	Female		star, strip, snip	None	white onto body	white onto body	white to hock	white to hind quarter	branded (C)
7		Sorrel	Quarter Horse	10 Years	Fenale		star	None	None	None	None	None	
8		Sorrel	Quarter Horse	4 Years	Female		star, strip, snip	None	None	None	fetlock	coronet	(5) (6) (5)
9		Sorrel	Quarter Horse	ll Years	Female		blaze	None	None	None	fetlock	None	branded (b) (6), (b) (
10		Chestnut	Quarter Horse	8 Years	Female		None	None	None	None	None	None	
1		Black	Quarter Horse	11 Years	Female		star, strip, snip	None	None	None	None	None	÷
12		Sorrel/ white	Paint	22 Years	Female		blaze	None	white onto body	white onto body	white to hind quarter	white to hind quarter	(b) (6
13		Bay roan	Quarter Horse	4 Years	Neutered Male		star	None	None	None	None	None	branded <mark>(7)(C</mark> shoulder
14		Chestnut	Quarter Horse	20 Years	Neutered Male		blaze	None	None	None	None	None	
15		Black/ white	Paint	6 Years	Female		blaze, lower lip	None	white to knee	None	white to hind	pastern	



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue

January 23, 2019

Certificate Number

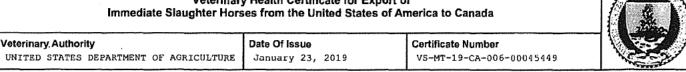
VS-MT-19-CA-006-00045449



ow	ID	Color	Breed	Age	Sex	Other ID / H Tattoo	lead	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
6	(b) (6), (b) (7)(C)	Chestnuc	Quarter Horse	22 Years	Neutered Male	(b) (6), (b) (7)(C)	laze	None	None	None .	quarter None	None	branded (b) (6), (b) shoulder
.7		Sorrel/ white	Appaloosa	6 Years	Female	b1	laze N	white over aind quarters	None	None	anterior coronet	None	(b) (6) (b)
8.		Red roan/white	Paint	12 Years	Keutered Male		aze, er lip	None	white to knee	white to knee	white to hind quarter	white to hock	branded <mark>(7)(C)</mark>
9		Black	Quarter Horse	15 Years	Eemale	3	tar	None	fetlock	coronet	fetlock	fetlock	(6) (0) (1
10		Red dun	Quarter Horse	ll Years	Neutered Male	bl	laze	Non€	None	coronet	None	None	branded (C) (b) (6), (b) (7) shoul
2.1		Sorrel	Quarter Horse	15 Years	Neutered Male	b)	laze	Nene	fetlock	None	coronet	Иопе	(6)
2		Sorrel	Quarter Horse	12 Years	Neutered Male	9	tar	None	None	None	fetlock	None	(b) (6
2.3		Sorrel	Quarter Horse	11 Years	Neutered Male		laze, er lip	None	None	None	white to hock	None	branded (7)(C shoulder
4		Bay	Quarter Horse	ll Years	Neutered Male		tar, snip	None	fetlock	fetlock	fetlock	fetlook	branded (b) (7) (c)
5		Brown/ white	Paint	8 Years	Neutered Male	s t	tar, rip, snip	None	white onto body	white onto body	white to hind quarter	white to hock	(b) (6)
16		Red roan/white	Faint	13 Years	Neutered Male		laze, er lip	. None	white to knee	white to knee	white to hind quarter	white to hind quarter	branded (6) (6) (b) (6) (b) (7)(c) hip
7		Black/ white	Paint	9 Years	Neutered Male	100	star	None	white to knoe	fetlock	white to hock	white to hock	•
8.5		Bay	Quarter Horse	10 Years	Female	7	None	None	None	None	caronet	None	
9		Bay roan/white	Paint	10 Years	Female		laze, er lip	None	fetlock	coronet	white to hock	white to hock	
0		Вау	Quarter Horse	20 Years	Female	st	tar, trip, snip	None	None	None	feclock	None	



# Veterinary Health Certificate for Export of



#### Certification Statements:

- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- 2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- 3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada. .

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian	Signature of USDA Veterinarian
Electronically Signed	Digitally Endorse
Date	Date
January 23, 2019	January 23, 2019

According to the Paperwork Radiuction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid CMB control number. The valid DMB control numbers for these information collections are 0579-0020, 0036, 0046, 0101, 0156, 0278, and 0432. The times required to complete these information collections is estimated to giverage. 25 to 1.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the caffection of information.

OMB Approved 0579-0020, 0036, 0048, 0101, 0156, 0278, and 0432

# Veterinary Health Certificate for Export of Immediate Slaughter Horses from the United States of America to Canada

Veterinary Authority	Date Of Issue		Certificate Number	
UNITED STATES DEPARTMENT OF AGRICULTURE	January 24, 2019		VS-MT-19-CA-006-00045518	
1. Consignor: (b) (6), (b) (7)(C)  MT (b) (6), (b) (7)(C)  United States		2. Consignee Bouvry E Fort Mac Canada		
3. Country Of Origin: USA		4. State Of Or Montana	gin:	
5. Country Of Destination: Canada		6. Zone Of De	stination:	
7. Place Of Origin: (b) (6), (b) (7) (C) MT (b) (6), (b) (7)(C)			oarkation/Border Crossing: etgrass - Border Port	
9. Estimated Date Of Shipment: January 29, 2019		10. Means Of Truck	Fransport:	
11. ***********************************	**********************	12. CITES Per	mit Number:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
13. Description Of Commodity: Horses		14. Date Of Ins 1/24/201		
15. Total Quantity:		16. Additional (See att	Information: ached Additional Information)	
17. Total Number Of Packages/Containers:		*******	*******	******
18. Identification / Seal Numbers:	*********	******	****************	**********
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Ac	<mark>lmission:</mark> E Import	
21. Identification Of Commodities:				
(See next page)				
************	******	****	**********	*********
**************************************	*******	. * * * * * * * * * * * * * * * * * * *	*************************************	*****
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	Series Will	Alliano		
	Equine Welfare	Alliance		

Certificate Number

VS-MT-19-CA-006-00045518

Veterinary Authority

UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue January 24, 2019

16. Additional Information: Continued

All horses are branded -S on left shoulder

Row	ID	Color	Breed	Age	Sex	Other ID / I	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
î —	(b) (6), (b) (7)(C)	Bay	Quarter Horse	16 Years	Neutered Male	31	star, trip, snip	None	None	None	None	None	
2		Sorrel/ white	Paint	12 Years	Neutereó Male	b	olaze	None	w	white ento body	white to hind quarter	white to hock	
3		Dun	Quarter Horse	5 Years	Neutered Male		star, snip	None	None	None	fetlock	None	
4		Brown/ white	Donkey	22 Years	Penale	5. 1	laze, Lowar lip	None	white onto body	white onto body	white to hind quarter	white to hind quarter	
5		Sorrel	Quarter Horse	20 Years	Neutered Male	5. 1	laze. lower lip	None			fetlock	coronel	branded (b) (b) (b) (c) (c) (c) (d) (d) (d) (d) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e
6		Dun/white	Faint	26 Years	Neutered Male	9 \$	star, trip, snip	None	fetlock	white to knee	white to hock	white to hock	
7		Palomino	Quartor Horse	16 Years	Neutered Maie		blaze	None	None	None	fetlock	fétlock	
3		Bay	Quarter Horse	16 Years	Female	ı	star, upper lip	None	None	fetlock	None	None	
9		Sorrel/ white	Paint	18 Years	Neutered Male		olaze, Lower Lip	None	white onto body	white onto body	white to hind quarter	white to hind quarter	
C		Ray	Quarter Horse	20 Years	Neutered Male	9	star, strip	None	None	None	None	řetlock	
-		Sorrel/ white	Paint	13 Years	Neutered Male	ŀ	blaze	None	white onco body	white onto body	white to hind quarter	white to hind quarter	
2		Blue roan/white	Appaloosa	26 Years	Neutered Male			ite over hind puarters	None	None	None	None	
1.3		Sorrel	Quarter Horse	15 Years	Neutered Male	2	blaze	None	fetlock	None	ferlock	ietlock	
1.4		Sorrel	Haflinger	10 Years	Neutered		olaze,	None	None	None	white to	white to	ilaxen mane and tail



Date Of Issue

Veterinary Authority

UNITED STATES DEPARTMENT OF AGRICULTURE

January 24, 2019

Certificate Number

VS-MT-19-CA-006-00045518



'	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
		1				(b) (6), (b) (7)(C)			LF	Kr			
_		_			Male		lower lip				hock	hock	
	b) (6), (b) (7)(C)	Bay	Quarter Horse	7 Years	Female		star,	None	None	faclock	fetlock	fetlock	
		•	_				snip						
		Sorrel/	Paint	15 Years	Neutered		blaze	None	None	None	None	None	
		white Blue roan	h-mal-see	22 Vasua	Male Neutered		star,	None	coronet	for oak	None	coronet	
		Bide toam	Appaloosa	20 lears	Male		snip	none	COTAMBE	Terrory	MOTTE	COLONEC	
		Bay	Quanter Horse	12 Years	Neutered		None	None	None	None	None	None	branded (b) (b) (7)(C) his
					Male								
		Sorrel	Mule	7 Years	Neutered Male		star	None	None	None	None	None	
		Bav	Quarter Horse	3 Years	Neutered		star,	None	None	None	fetlock	coronet	
		2			Male		snip						
		Palomino	Quarter Horse	9 Years	Female		star	Mone	None	None	None	None	
		Red dun	Quarter Horse	20 Veers	Neutered		star,	None	None	None	fetlock	None	
		mad was	Aggreet Horse	20 10213	Male		strip,	110112	113116	,,,,,,	1 4 5 4 5 5 10		
							snip						(b) (6),
		Bay roan	Quarter Horse	10 Years	Female		star	None	Иои <del>с</del>	Mone	None	None	branded (b) (7) hip
		Palomino	Quarter Sorse	'6 Years	Neutered		None	None	None	None	None	None	
		T 44 14 44 44 44 44 44 44 44 44 44 44 44	***************************************		Male								(b) (6),
		Blue roan	Quarter Horse	20 Years	Neutered		star	None	posteri	None	None	None	branded (b) (7) shoulder
					Male				or				(C)
		Sorrel	Quarter Horse	18 Years	Female		star,	None	None	None	None	None	
		Sorrer	Angres uorse	ro reare	researe		strip,	110110	44.74.2	110110	11-110	*****	
							gina						
		Dun	Quarter Horse	7 Years	Neutered		None	None	None	None	None	None	
			0	4. V	Male		star	None	None	None	fetlock	None	
		Bay-brown	Quarter Horse	4 Years	Female		0-41	voue	Worker	WOILD	* 10 1 4 10 10 10 10	110115	
		Sorrel	Quarter Horse	£ Years	Female		blaze	None	None	None	None	None	(b) (6)
											None	None	branded (b) (7)
1		Bay	Quarter Horse	3 Years	Female		None	None	None	None	Mone	Nous	branded outtook





Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE Date Of Issue

Certificate Number

January 24, 2019

VS-MT-19-CA-006-00045518

#### Certification Statements:

- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- 2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- 3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian	Signature of USDA Veterinarian
Electronically Signed	Digitally Endorsed (b) (6), (b) (7)(C)
Date	Date
January 24, 2019	January 24, 2019

According to the Paperwork Reduction Act of 1995, on agency may not conduct or apensor, and a person is not required to respond to, a callection of information unless it displays a valid OMB control number. The valid OMB control numbers for those information collections are 0579-0020, 0036, 0049, 0101, 0158, 0278, and 0432. The times required to complete those information collections is estimated to average .25 to 1.5 hours 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 Approved 0579-0020, 0036, 0048, 0101, 0156, 0278, and 0432

# Veterinary Health Certificate for Export of Immediate Slaughter Horses from the United States of America to Canada

Veterinary Authority	Date Of Issue	_	Certificate Number	
UNITED STATES DEPARTMENT OF AGRICULTURE	January 30, 2019	)	VS-MT-19-CA-006-00045625	
	,			
1. Consignor: (b) (6), (b) (7)(C)		2. Consignee: Bouvry E		
(6) (6) (7)		Fort Mac	Leod, Alberta	
MT (0) (0) (7) United States		Canada		
0112 0000 0 00000				
·				
3. Country Of Origin:		Charle Of O		
USA	1	4. State Of Or Montana	igin:	
5. Country Of Destination:		6. Zone Of De		
Canada		******	**********	******
7 Blace Of Origin:			barkation / Border Crossing: etgrass - Border Port	
(h) (e) (h) (7)(h) (6) (h) (7)	1	FII - U	ecdrass - porder rore	
(C) MT (G) (G)	1	l		
	1			
9. Estimated Date Of Shipment:		10. Means Of		
February 4, 2019		Truck	Transport:	
11, ****************************	******	12. CITES Pen	mit Number:	
***********	******	*******	***************	******
13. Description Of Commodity: Horses		14. Date Of Inc 1/30/201	spection: 9	
15. Total Quantity: 30		16. Additional (See att	Information: ached Additional Information)	
17. Total Number Of Packages/Containers:	*********	*****	***********	**********
18. Identification / Seal Numbers:				
******************	********	*****	**************	******
19. Commodities Intended Use:		20. Type Of Ac	imission:	
Immediate Slaughter		Permanen		
21. Identification Of Commodities:			ACCUSED TO THE RESIDENCE OF THE PARTY OF THE	
(See next page)				
***********	*****	******	***********	**********
******************************	******	********** *******	*************************	******
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	Lquine wei	rare Alliance		

Date Of Issue

January 30, 2019

Certificate Number

VS-MT-19-CA-006-00045625



#### 16. Additional Information: Continued

Veterinary Authority

All horses are branded -S on left shoulder

UNITED STATES DEPARTMENT OF AGRICULTURE

ow	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	(b) (6), (b) (7)(C)	Buckskin	Quarter Horse	10 Years		(b) (6), (b) (7)(C)	star,	None	None	None	fetlock	None	4
					Male		snip						(b) (6), (
2		Bay	Quarter Horse	10 Years	Female		star, strip	None	None	None	None	None	branded (C)
3		Sorrel/	Paint	16 Years	Female		star,	None	white	white	white to	white to	
		white					strip,		onto	onto	hock	hind	
							snip		body	body		quarter	
		Brown	Quarter Horse	15 Years	Female		star	None	None	None	None	None	
,		Black	Quarter Horse	14 Years	Neutered Male		None	None	None	None	None	None	branded (b) (6), (b) (6), (b) (7)(C)
;		Sorrel/	Paint	10 Years	Neutered		blaze	None		white to	fetlock	fetlock	
		white			Male				knee	knee			
		Bay	Quarter Horse	10 Years	Neutered Male		None	None	None	None	None	None	
		Sorrel	Quarter Horse	10 Years	Female		star	None	None	None	None	None	
;		Bay	Quarter Horse	10 Years	Neutered Male		star, snip	None	None	None	None	coronet	•
0		Chestnut	Quarter Horse	21 Years	Neutered Male		blaze	None	None	Успе	fetlock	None	
1		Bay/white	Paint	15 Years	Neutered Male		star, snip	None	fetlock	white to knee	white onto body	white onto body	
2		Bay/white	Paint	20 Years	Neutered		white	None	white	white	white to	white to	
		-			Male		face		onto	onto	hind	hind	
									body	cody	quarter	quarter	
3		Bay	Quarter Horse	20 Years	Neutered Male		star	None	fetlock	None	fetlock	fetlock -	
4		Black/ white	Appaloosa	10 Years	Neutered Male		star	None	None	None	fetlock	fetlock	(h) (6
5		вау	Quarter Horse	10 Years	Female		star	None	None	None	coronet	None	branded (C) (b) (6), (b) (7)
6		Red roan	Quarter Horse	12 Years	Female		blaze	None	None	None	None	None	(C)
7		Bay/white	Paint	l Year	Female		blaze, Lower lip	None	white	white to	white to hind	white to	



Veterinary Authority

Date Of Issue

Certificate Number

UNITED STATES DEPARTMENT OF AGRICULTURE

January 30, 2019

VS-MT-19-CA-006-00045625



ow	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
	(b) (6), (b) (7)(C)					b) (6), (b) (7)(C)			body		quarter	quarter	
18	(5) (5), (5) (1)(5)	Bay	Quarter Horse	10 Years	Female		star, strip	None	None	None	fetlock	fetlock	
19		Sorrel	Quarter Horse	13 Years	Neutered Male		star, strip	None	None	None	None	None	
20		Dark chestnut	Quarter Horse	25 Years	Female		star	None	None	None	fetlock	None	
21		Palomino	Quarter Horse	10 Years	Female		blaze	None	None	None	fetlock	medial coronet	
22		Chestnut	Quarter Horse	17 Years	Female		b1aze	bird spots throughout body	None	None	None	coronet	
23		Вау	Quarter Horse	16 Years	Neutered Male		star, snip	None	None	None	fetlock	None	
24		Black	Quarter Horse	5 Years	Female		star	None	None	None	None	fetlock	
25		Black	Quarter Horse	20 Years	Neutered Male		star, strip, snip	None	None	None	None	None	
25		Sorrel	Quarter Horse	10 Years	Female		star	None	None	None	More	None	
27		Sorrel	Quarter Horse	9 Years	Female		star	None	coronet	coronet	None	fetlock	
28		Bay	Quarter Horse	20 Years	Female		star	None	None	None	None	None	
29		Black	Quarter Horse	5 Years	Female		None	None	fetlock	coronet	white to hock	white to hock	
30		Chestnut	Quarter Horse	14 Years	Neuterec Male		star, strip	None	None	None	None	None	



Veterinary Authority Date Of Issue Certificate Number UNITED STATES DEPARTMENT OF AGRICULTURE January 30, 2019 VS-MT-19-CA-006-00045625



#### **Certification Statements:**

- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- 2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- 3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian	Signature of USDA-Veterinaries
Electronically.Signed	Digitally Endorsed
Date	Date
January 30, 2019	January 30, 2019

According to the Poperwork Radiation Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for these information collections are 0579-0020, 0036, 0046, 0101, 0156, 0276, and 0432. The limes required to complete these information collections is estimated to sverage 25 to 1.5 hours 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.

Immediate Slaughter Horses from the United States of America to Canada

# OMB Approved 0579-0620, 0036, 0848, 0101, 0156, 0278, and 0432 STATISTICS OF Veterinary Health Certificate for Export of

Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 31, 2019	)	Certificate Number VS-MT-19-CA-006-00045644	
1. Consignor: (b) (6), (b) (7)(C)  MT (0) (6), (b) (7)  United States		2. Consignee Bouvry E Fort Mad Canada		
3. Country Of Origin: USA		4. State Of Or Montana	igin:	
5. Country Of Destination: Canada		6. Zone Of De	stination:	*******
7. Place Of Origin: (b) (6), (b) (7)(C)  (b) (6), (b) (7)  (c)  MT (b) (6), (b) (7)  (C)			barkation / Border Crossing: etgrass - Border Port	
9. Estimated Date Of Shipment: February 4, 2019		10. Means Of Truck	Transport:	
<b>11,</b> ***********************************	1	12. CITES Per	mit Number:	*******
13. Description Of Commodity: Horses		14. Date Of Inc 1/30/201	spection: 9	
<b>15. Total Quantity:</b> 29		16. Additional (See att	Information: ached Additional Information)	
17. Total Number Of Packages/Containers:	*****	******	****	******
18. Identification / Seal Numbers:	****	*****	**********	******
19, Commodities Intended Use: Immediate Slaughter		20. Type Of Ac		
21. Identification Of Commodities:  (See next page)  ***********************************	**************************************	* * * * * * * * * * * * * * * * * * *	**************************************	**************************************
	Equine Welfare	Alliance		

Veterinary Authority

UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue

January 31, 2019

Certificate Number

VS-MT-19-CA-006-00045644

#### 16. Additional information: Continued

All horses are branded -S on left shoulder

w	ID	Color	Breed	Age	Sex	Other ID / Head Tattoo	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
	(b) (6), (b) (7)(C)	Sorrel	Quarter Horse	10 Years	Neutered	(b) (b), (b) (7)(C) blaze,	None	None	white to	white to	white to-	
					Male	lower lip			knee	hock	hock	
		Sorrel	Quarter Horse	16 Years	Neutered Male	star	None	None	None	None	None	
		Sorrel	Quarter Horse	17 Years	Neutered Male	blaze	None	None	None	None	None	
		Brown	Quarter Horse	10 Years	Neutered Male	None	None	None	None	None	None	
		Palomino	Quarter Horse	10 Years	Female	star	None	None	None	None	None	
		Palomino	Quarter Horse	20 Years	Female	blaze, lower lip	None	None	None	None	fetlock	branded (b) (6), (b) (7)
		Palomino	Quarter Horse	10 Years	Female	star	None	None	None	None	None	
		Black	Quarter Horse	8 Years	Neutered Male	star, strip, snip	None	None	None	fetlock	pastern	
		Dun	Quarter Horse	10 Years	Female	star, strip, snip	None	fetlock	fetlock	fetlock	fetlock	
		Buckskin/ White	Paint	10 Years	Neutered Male	-	enoM	fetlock	fetlock	white to hock	white to	
_		Bay	Quarter Horse	10 Years	Neutered Male	star, strip, snip	None	None	fetloc <b>k</b>	fetlock	fetlock	
		Bay	Quarter Horse	14 Years	Neutered Male		None	None	None	None	None	
		Brown	Quarter Horse	20 Years	Female	star	None	None	None	pastern	fetlock	
		Brown	Quarter Horse	4 Years	Neutered Male	star, snip	None	coronet	Non∉	fetlock	None	
		Red dun	Quarter Horse	10 Years	Neutered Male	star, strip, snip	None	Моле	None	None	fetlock	
,		Bay	Quarter Horse	10 Years	Female	star	None	None	None	None	None	



Date Of Issue UNITED STATES DEPARTMENT OF AGRICULTURE

Veterinary Authority

January 31, 2019

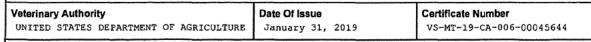
Certificate Number

VS-MT-19-CA-006-00045644



ow	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head -	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
17	(b) (6), (b) (7)(C)	Sorrel	Quarter Horse	11 Years	Female	(b) (6), (b) (7)(C)	blaze	None	None	None	None .	None	flaxen mane and tail
18		Red dun	Quarter Horse	20 Years	Female .		star, strip, snip	None	None	None	None	None	
19		Black	Quarter Horse	10 Years	Female		star	None	None	None	None	None	
20		Sorrel	Quarter Horse	20 Years	Female		star, strip, snip	None	None	None	medial coronet	Коле	
!1		Sorrel	Quarter Horse	15 Years	Neutered Male		blaze	None	fetlock	white to knee	white to hock	white to hack	
2		Palomino	Quarter Horse	10 Years	Neutered Male		star	None	None	None	None	None	
3		Red roan	Quarter Horse	10 Years	Neutered Male		star	None	None	None	None	None	/b) /6) /b) /7
4		Cremello	Quarter Horse	13 Years	Female		None	None	None	None	None	None	branded (b) (b) (b) (c) (b) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d
:5		Black	Quarter Horse	17 Years	Female		None	None	None	None	None	None	
6		Chestnut/ white	Paint	10 Years	Neutered Male		blaze, ower lip	None	white onto body	white	white to hind quarter		
27		Palomino	Quarter Horse	14 Years	Neutered Male		strip,	None	None	None	pastern	None	
8 8		Red dun	Quarter Horse	10 Years	Female		blaze	None	None	None	fetlock	pastern	
29		Black	Quarter Horse	20 Years	Neutered Male		None	None	None	None	None	None '	







#### Certification Statements:

- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- 3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian Digitally Encorred
Date	Date
January 31, 2019	January 31, 2019

According to this Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unloss it displays a valid OMB control number. The valid OMB control number for these information collections are 0519-0020, 0036, 0046, 0101, 0159, 0278, and 0432. The times required to complete these information collections is estimated to average 25 to 1.5 hours per response, including the time for reviewing instructions, searching entiting date sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

## Veterinary Health Certificate for Export of Immediate Slaughter Horses from the United States of America to Canada

				10 12 12 12 12 12 12 12 12 12 12 12 12 12
Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 31, 201	9	Certificate Number VS-MT-19-CA-006-00045645	
1. Consignor: (b) (6), (b) (7)(C)  MT (b) (6), (b) (7)(C)  United States	•	2. Consignee Bouvry F Fort Mad Canada		
3. Country Of Origin: USA		4. State Of Or Montana	rigin:	
5. Country Of Destination: Canada		6. Zone Of De	estination:	*********
7. Place Of Origin: (b) (6), (b) (7)(C)  (b) (6), (b) (7) (C)  MT (C)  (b) (6), (b) (7) (C)			barkation/Border Crossing: eetgrass - Border Port	
9. Estimated Date Of Shipment: February 5, 2019		10. Means Of Truck	Transport:	
11. *******************************	*****	12. CITES Per	mit Number:	***********
13. Description Of Commodity: Horses		14. Date Of In 1/31/201		
15. Total Quantity: 30		16.Addillonal (See att	Information: ached Additional Information)	,
17. Total Number Of Packages/Containers:	****	*******	***********	**********
18. Identification / Seal Numbers:	*********	*******	*************	
19. Commodities Intended Use: Immediate Slaughter		20. Type Of A	dmission: t Import	
21. Identification Of Commodities:				



(See next page)

ANTINO O

 Date Of Issue
 Certificate Number

 January 31, 2019
 VS-MT-19-CA-006-00045645



16. Additional Information: Continued

Veterinary Authority

All horses are branded -S on left shoulder

UNITED STATES DEPARTMENT OF AGRICULTURE

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	(b) (6), (b) (7)(C)	Palomino	Quarter Horse	10 Years	Female	(b) (6), (b) (7)(C)	blaze	None	None	None	fetlock	None	blind left eye
2		Black	Quarter Horse	10 Years	Female		star	None	None	None	None	fetlock	
3		Вау	Quarter Horse	10 Years	Female		star, snip	None	None	None	fetlock	fetlock	(1) (2) (3)
9		Chestnut	Quarter Horse	10 Years	Female		star	None	None	None	None	fetlock	branded (C) shoulder
5		Bay	Quarter Horse	10 Years	Neutered Male		star	None	None	None	posterior coronet	None	
6		Brown	Quarter Horse	10 Years	Female		star	None	None	None	None	None	A STATE OF THE STATE OF T
7		Brown	Quarter Horse	10 Years	Neutered Male		star, strip, snip	None	None	None	None	None	
8		Sorrel	Quarter Horse	10 Years	Neutered Male		star, strip, snip	None	fetlock	lateral coronet	fetlock	fetlock	branded (b) (6), (b) (7 (b) (6), (b) (7)(C) hi
9		Grullo	Quarter Horse	10 Years	Female		None	None	None	None	None	None	
10		Вау	Quarter Horse	10 Years	Neutered Male		star, snip	None	None	None	None	pastern	
11		Sorrel/ white	Appaloosa	10 Years	Female		star, strip, snip	None	None	None	fetlock	fetlock	
12		Brown	Quarter Horse	10 Years	Neutered Male		blaze	None	None	None	fetlock	fetlock	*.
13		Bay	Quarter Horse	10 Years			star	None	None	None	None	None	e. ac
14		Black/ white	Appaloosa	10 Years	Neutered Male		blaze, lower lip	white over	None	None	fetlock	fetlock	# * * * * * * * * * * * * * * * * * * *
15		Chestnut	Appaloosa	10 Years			star	None	None	None	None	None	
16		Palomino	Quarter Horse	20 Years	Female		star, strip, snip	None	None	None	fetlock	fetlock	blind left eye



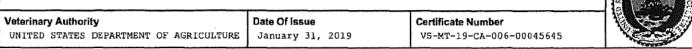
Veterinary Authority Date Of Issue UNITED STATES DEPARTMENT OF AGRICULTURE

Certificate Number VS-MT-19-CA-006-00045645 January 31, 2019



v	ID	Color	Breed	Age	Sex	Other ID / Head Tattoo	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
	(b) (6), (b) (7)(C)	Black	Quarter Horse	10 Years	Femal <b>e</b>	(b) (6), (b) (7)(C) star	None	None	None	fetlock	lateral coronet	branded (C) shoulder
		Bay	Quarter Horse	ll Years	Neutered Male	star	None	None	None	None	None	
		Bay	Quarter Horse	10 Years	Female	None	None	Иопе	None	None	None	
		Brown	Quarter Horse	10 Years	Neutered Male	star	None	None	None	None	enoM	
		Palomino	Quarter Horse	10 Years	Female	blaze	None	None	None	fetlock	fetlock	
		Brown/ white	Paint	10 Years	Neutered Male	blaze, lower lip	None	white onto <b>body</b>	white onto body	white to hind quarter	white to hind quarter	
		Bay-brown	Quarter Horse	10 Years	Female	star	None	None	None	None	None	
		Chestnut	Quarter Horse	10 Years	Neutered Male	star, strip, snip	None	None	None	fetlock	fetlock	(b) (6) (b)
		Bay	Quarter Horse	10 Years	Female	blaze	None	None	None	fetlock	fetlock	branded shoulder
		Bay	Quarter Horse	10 Years	Neutered Male	blaze	None	fetlock	fetlock	fetlock	fetlock	
		Вау	Quarter Horse	11 Years	Neutered Male	star	None	None	None	None	fetlock	
		Palomino	Quarter Horse	8 Years	Neutered Male	blaze	None	None	fetlock	fetlock	None	
		Chestnut	Quarter Horse	10 Years	Female	star, strip, snip	None	None	None	None	None	(6) (6) (
		Bay	Quarter Horse	11 Years	Neutered Male	_	None	fetlock	fetlock	fetlock	fetlock	branded (b) (6), (b) (7) hi







- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- 2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- 3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian	Signature of USDA Voltagin (6) (7)(C)
Electronically Signed	Digitally Engorse
Date	Date
January 31, 2019	January 31, 2019

# Veterinary Health Certificate for Export of

Veterinary Immediate Slaughter Hors	y Health Certificate sees from the United	for Export of States of A	of merica to Canada	
Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 2, 2019		Certificate Number VS-MT-19-CA-006-00044822	
1. Consignor: (b) (6), (b) (7)(C)  MT (b) (6), (b) (7)(C)  United States	,	2. Consigned Bouvry 1 Fort Mad Canada		
3. Country Of Origin: USA		4. State Of Or Montana		
5. Country Of Destination: Canada		6. Zone Of De	estination:	********
7. Place Of Origin: (b) (6), (b) (7)(C)  , MT (b) (6), (b) (7)(C)			nbarkation / Border Crossing: eetgrass – Border Port	
9. Estimated Date Of Shipment: January 7, 2019		10. Means Of Truck	Transport:	
11. ***********************************	******		rmit Number: ***************************	*******
13. Description Of Commodity: Horses		14. Date Of in 1/2/2019	spection: )	
15. Total Quantity: 30			linformation: tached Additional Information)	
17. Total Number Of Packages/Containers:	******	*****	*******	******
18. Identification / Seal Numbers: ************************************	******	*****	**************	********
19. Commodities intended Use: Immediate Slaughter		20. Type Of A	ddmission: nt Import	
21. Identification Of Commodities:				
(See next page)				
**********				
**************			**************************************	·***************
	JA.			
		7		



Date Of Issue Certificate Number

UNITED STATES DEPARTMENT OF AGRICULTURE January 2, 2019 VS-MT-19-CA-006-00044822



#### 16. Additional Information: Continued

Veterinary Authority

All horses are branded -S on left shoulder

ow	ID	Calor	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	(b) (6), (b) (7)(C)	bay roan	Quarter Horse	15 Years	Female	(b) (6), (b) (7)(C)	star	None	None	None	None	fetlock	branded (7)(C) thigh
2		Sorrel	Quarter Horse	13 Years	Neutered Male		star, strip, snip	None	None	lateral coronet	fetlock	fetlock	branded (b) (6), (b) (7) (b) (6), (b) (7)(C) shoulde
3		Bay	Quarter Horse	10 Years	Neutered Male		star	None	None	fetlock	fetlock	coronet	
4		Chestnut/ white	Paint	10 Years	Neutered Male		star	None	white to knee	fetlock	fetlock	white to hock	branded hip
5		Bay	Quarter Horse	10 Years	Neutered Male		None	None	None	None	None	None	(/b) (6) /b) (
6		Вау	Quarter Horse	10 Years	The second residence and the second		star	None	None	None	None	None	branded shoulder, (b) (6), (b) (7)( hip
7		Dun	Quarter Horse	10 Years	Female		star, strip, snip	None	None	None	None	None	
8		Dun	Quarter Horse	10 Years	Female		star, strip, snip	None	None	coronet	None	fetlock	
9		Bay roan	Quarter Horse	10 Years	Female		star,	None	None	None	None	fetlock	branded L hip
10		Brown	Quarter Horse	10 Years	Female		star	None	None	None	fetlock	None	ten kiloman
11		Brown	Quarter Horse	10 Years	Female		None	None	None	None	None	иопе	blind left eye
12		Sorrel	Quarter Horse	10 Years	Female		star, strip, snip	None	fetlock	None	None	fetlock	
13		Sorrel/ white	Appaloosa	10 Years	Female		blaze	white over hind quarters	None	None	None	None	are recording
14		Sorrel/ white	Paint	10 Years	Female		white face	None	fetlock	fetlock	white to hock	white to hock	
15		Bay roan	Quarter Horse	10 Years	Neutered Male		star, snip	None	pastern	lateral coronet	fetlock	fetlock	



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
January 2, 2019

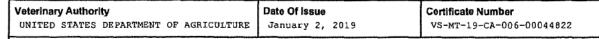
Certificate Number

VS-MT-19-CA-006-00044822



w	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
6	(b) (6), (b) (7)(C)	Dun	Quarter Horse	10 Years	Female	b) (6), (b) (7)(C)	blaze	None	fetlock	fetlock	fetlock	None	
		Chestnut	Quarter Horse	10 Years	Female		star .	None	None	None	fetlock	fetlock	
3 7		Sorrel	Quarter Horse	10 Years	Female		star, strip,	None	None	pastern	coronet	None	
<b>.</b>		Вау	Quarter Horse	10 Years	Female		snip None	None	None	None	posterior coronet	None	
0		Sorrel	Quarter Horse	10 Years	Neutered Male		star, strip, snip	None	coronet	coronet	fetlock	fetlock	2
1		Chestnut	Quarter Horse	10 Years	Female		star, strip, snip	None	fetlock	white to knee	white to hock	coronet	
2		Bay	Quarter Horse	10 Years	Neutered Male		star,	None	None	None	None	None	Material Science Science Co.
3		Sorrel/ white	Paint	10 Years	Neutered Male		blaze	Моле	white onto body	white onto body	white to hind quarter	white to hind quarter	
4		Brown/ white	Paint	10 Years	Female		star, strip, snip	None	and the second s	white to knee	white to hind quarter	white to hind quarter	sylvate same of
5		Sorrel/ white	Paint	10 Years	Neutered Male		star	None	white onto body	white onto body	white to hind quarter	fetlock	blind left ey
6		Sorrel	Quarter Horse	10 Years	Neutered Male		star, strip, snip	Mone		lateral coronet	fetlock	fetlock	4 A 160 (5) Min. 44
7		Bay	Quarter Horse	: 10 Years	Neutered Male		None	None	None	None	None	None	
8		Bay/white	Paint	10 Years	Neutered Male		blaze	None	white onto body	white onto body	white to hind quarter	white to hind quarter	. (5) (6)
9		Bay	Quarter Horse	ĩ0 Years	Neutered Male		None	None	None	None	None	None	branded (C) shoulder
0		Bay	Quarter Horse	10 Years	. Female		star	None	None	None	fetlock	None	1 manuary 1 / manu







#### Certification Statements:

- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- 3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinar(b) (6), (b) (7)(C) Digitally Endorsed
Date	Date
January 2, 2019	January 2, 2019

According to the Paperwork Reduction Act of 1925, an agency may not conduct or sponser, and a person is not required to respond to, a collaction of information unloss it displays a valid OMB control number. The valid OMB control number for these information collections are 0579-0020, 0036, 0048, 0101, 0156, 0278, and 0432. The times required to complete these information collections is estimated to average 25 to 1.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the date needed, and completing and reviewing the collection of information.

#### OMB Approved 0579-0020, 0036, 0048, 0101, 0156, 0278, and 0432

# Veterinary Health Certificate for Export of Immediate Slaughter Horses from the United States of America to Canada

Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 3, 2019		Certificate Number VS-MT-19-CA-006-00044886	
1. Consignor: (b) (6), (b) (7)(C)  MT 59474  United States		2. Consignee: Bouvry E Fort Mac Canada		
3. Country Of Origin: USA		4. State Of Orl	gin:	
5. Country Of Destination: Canada		6. Zone Of De	stination:	******
7. Place Of Origin: (b) (6), (b) (7)(C)  MT (C)  (B) (6), (D) (7)		8. Port Of Emi MT - Swe	oorkation/Border Crossing: etgrass - Border Port	
9. Estimated Date Of Shipment: January 7, 2019		10. Means Of Truck	ransport:	
11, ***********************************	******	12. CITES Pen	nit Number:	************
13. Description Of Commodity: Horses		14. Date Of Ins 1/2/2019	pection:	
15. Total Quantity: 30		16. Additional (See atta	Information: ached Additional Information)	
17. Total Number Of Packages/Containers:	******	******	********	*****
18. Identification / Seal Numbers:	*****	******	**********	***********
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Ad Permanent		
21. Identification Of Commodities:				
(See next page)				
**********	****	******	*****	******
************	******	******	******	******
			·	
	44			
		K/2)		
	Equine Welfa	re Alliance		

Date Of Issue Certificate Number

January 3, 2019 VS-MT-19-CA-006-00044886

VS-MT-19-CA-006-00044886

16. Additional information; Continued

Veterinary Authority

All horses are branded -S on left shoulder

UNITED STATES DEPARTMENT OF AGRICULTURE

Row	ID	Color	Breed	Age	Sex	Other ID / H	ead Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
	(b) (6), (b) (7)(C)	Sorrel	Quarter Horse	10 Years	Female	b) (6), (b) (7)(C) b1	aze None	fetlock	fetlock	medial	coronet	branded (b) (6), (b) (7)(C
										coronet		hip
		Red dun	Quarter Horse	10 Years	Female		strip, None	efetlock	fetlock	fetlock	fetlock	
		Eay	Quarter Horse	10 Years	Neutered Male		strip, Mone nîp	None	None	lateral coronet	None	
		Red dur.	Quarter Horse	10 Years	Neutered Male	14	one None	None	Мопе	None	None	
		Sorrel	Ouarter Horse	10 Years	Female	·· bi	laze None	None	None	fetlock	None	(b) (c) (b) (7)(
		Sorrel	Quarter Horse	10 Years	Female	ĎΪ	laze None	None	None	None	fetlock	branded hip
		Bay/white	Paint	10 Years	Neutered Male		strip, None	efetlock	white onto	white to hock	white to hock	A Section 1
		Black	Quarter Horse	10 Years	Female	N	one None	None	None	None	None	
		Palomino	Quarter Horse	10 Years	Neutered Male	bl	laze None	white to knee	fetlock	white to hock	white to hock	
		Вау	Quarter Horse	10 Years	Neutered Male	12	one None	e None	None	None	None	
		Bay	Quarter Horse	10 Years	Female	5	tar None	e None	None	None	None	
		Chestmut roam	Appaloosa	10 Years	Female		strip, None	e None	None	None	None	
		Brown	Quarter Horse	10 Years	Female	ь1	laze None	e None	None	None	None	
		Sorrel	Quarter Horse	10 Years	Female		strip, None	e None	None	fetlock	fetlock	
		Palomino	Quarter Horse	10 Years	Female		strip, None	e None	None	None	fetlock	we*-
		Sorrel	Quarter Horse	10 Years	Female	b	laze None	u None	None	fetlock	fetlock	
		Sorrel	Quarter Horse	10 Years	Female	, b.	laze Non	e fetlock	None	pastern	None	
		Chestnut	Quarter Horse	10 Years	Female		strip, Non-	e None	None	None	fetlock	
,		Brown	Quarter Horse	10 Years	Neutered Male	5	star Non	e None	None	coronet	None	
)		Red dun	Quarter Horse	10 Years	Female	b	laze Non	e None	None	None	None	
		Bay/white	Paint	10 Years	Neutered	ь	laze Non-	e white to	white to	white to	white to	



**Veterinary Authority** 

Date Of Issue

Certificate Number

UNITED STATES DEPARTMENT OF AGRICULTURE

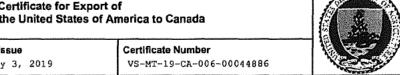
January 3, 2019

VS-MT-19-CA-006-00044886



w	ID	Color	Breed	Age	Sex	Other ID / Head Tattoo	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add, Desc.
	(b) (6) (b) (7)(C)	I			Male	b) (6), (b) (7)(C)		knee	knae	hock	hock	1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
2		Palomino	Quarter Horse	10 Years	Female	star, snip	None	None '	None	None	None	
		Sorrel	Quarter Horse	10 Years	Female	star, strip		None	None	None	None	
		Sorrel	Quarter Horse	10 Years	Male	star, stri	None	None	None	fetlock	fetlock	
		Chestnut	Quarter Horse	. 10 Years	Female	None	None '	None	None	None	None	anne de la prospectation de la
;		Brown	Quarter Horse	10 Years	Female	None	None	None	None	coronet	None	blind left eye
		Palomino	Quarter Horse	10 Years	Female	star	None	None	None	None	None	branded (b) (6), (b) (7)(C) (b) (6), thigh
		Bay roan/white	Paint	10 Years	Neutered Male		None	None	None	fetlock	fetlock	(b) (7)(C)
		Sorrel	Quarter Horse	10 Years	Female	blaze	None	None	None	fetlock	fetlock	
		Sorrel	Quarter Horse	10 Years	Neutered Male	star, stri	None	None	None	None	None	





Veterinary Authority

Date Of Issue

UNITED STATES DEPARTMENT OF AGRICULTURE

January 3, 2019

#### Certification Statements:

- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- 2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- 3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterico (0) (0) (0) (0) (0) Digitally Endorsed
Date	Date
January 3, 2019	January 3, 2019

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a posson is not required to respond to, a collection of information unless it displays a valid CMB control number. The valid CMB control numbers for these information collections are 0579-0020, 0036, 0048, 0101, 0156, 0278, and 0432. The times required to complete these information collections is estimated to average .25 to 1.5 hours 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 Approved 0579- 0020, 0036, 0048, 0101, 0156, 0278, and 0432

SPARIMEN

## Veterinary Health Certificate for Export of Immediate Slaughter Horses from the United States of America to Canada

Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 3, 2019		Certificate Number VS-MT-19-CA-006-00044905	
1. Consignor:  (b) (6), (b) (7)(C)  MT (b) (6), (b) (7)(C)  United States		2. Consignee: Bouvry E Fort Mac Canada		
3. Country Of Origin: USA		4, State Of Ori	igin:	
5. Country Of Destination: Canada		6. Zone Of De:	estination: ************************************	*****
7. Place Of Origin: (b) (6), (b) (7)(C) (b) (6), (b) (7) (T)(C)  MT (b) (6), (b) (7) (T)(C)			barkation / Border Crossing: eetgrass - Border Port	·
9. Estimated Date Of Shipment: January 8, 2019		10. Means Of	Transport:	
11, ***********************************	******	12. CITES Pen	mit Number:	
13. Description Of Commodity: Horses		14. Date Of Inc 1/3/2019		
15. Total Quantity: 30		16. Additional (See atta	Information: ached Additional Information)	
7. Total Number Of Packages/Containers:	******	******	/4454444444444444444444444444444444444	******
8. Identification / Seal Numbers:	********	****	**********	*******
9. Commodities intended Use: Immediate Slaughter		20. Type Of Ad Permanent	imission: t Import	
1. Identification Of Commodities:	***************************************	<del></del>	And the second s	
(See next page)				
**************************************	*******	*****		*********
	Equine Welfare	Alliance		

Veterinary Authority Date Of Issue Certificate Number UNITED STATES DEPARTMENT OF AGRICULTURE January 3, 2019

VS-MT-19-CA-006-00044905

#### 16. Additional Information: Continued

All horses are branded -S on left shoulder

w	ID	Color	Breed	Age	Sex	Other ID /	Head	Body	Limb	Limb	Limb	Limb	Add. Desc.
	(b) (6) (b) (7)(C)				L	Tattoo			LF	RF	LH	RH	
	(b) (6), (b) (7)(C)	Buckskin/	Paint	12 Years	Neutered	(b) (b), (b) (1)(C)	blaze	None	white to knee		white	white	
		white			Male					to knee	to	to	
		51. 1	O	20 3	F 3						hock	hock	(b) (6),
		Black	Quarter Horse	18 Years	Female		star	None	anterior/ posterior	None	None	fetloc k	branded (b)(7)(C)hip
									coronet			κ.	(b) (c)
		Bay	Ouarter Horse	10 Years	Neutered		star,	None	fetlock	fetlock	fetloc	fetloc	branded (7)(C) shoulder, (b) (7)
		Day	Andreas Horse		Male		strip,	none	20020011	10110CK	k	k	(b) (6), (b) (7) hip
					*******		snip						(C)
		Red	Paint	9 Years	Female		blaze	None	white to knee	white	white	white	
		roan/white					-			to knee	to	to	
											hock	hock	
		Black	Draft	24 Years	Female		star	None	None	None	None	None	
		Blue roan	Quarter Horse	9 Years	Neutered		snip	None	coronet	fetlock	None	fetloc	
					Male		4.					k	
		Sorrel.	Quarter Horse	21 Years	Neutered Male		star	None	Notie	None	None	None	
		Black	Quarter Horse	14 Years	and a second by the		star	None	None	None	Моле	None	
		pidcy	Odarcer norse	14 16912	remere		Scal	NOILE	None	NOTTE	140116	None	
		Bay	Quarter Horse	4 Years	Neutered		star,	None	fetlock	fetlock	fetlcc	fetloc	
		2.0,			Male		snip				k	k	
		Bay	Quarter Horse	6 Years	Neutered		star,	None	None	None	None	None	
		-	_		Male		snip						
		Sorrel	Quarter Horse	22 Years	Neutered		star,	None	None	None	None	None	
					Male		snip						
		Palomino	Quarter Horse	28 Years	Neutered		blaze	None	None	fetlock		white	
					Male						to.	.to.	
											neck	hock	
		Black	Quarter Horse	ll Years	Female		star	None	None	None	None	None	(BV
		Chestnut/	Paint	9 Years	Female		blaze	None	None	None	None	None	branded (b) (7)(c) shoulder, (C)
		white	EGTILE	) redis	remare		Drare	Hone	110116	110116	HOLIG	HOING	(b) (6), (b) (7)(C) hip
		Bay	Quarter Horse	12 Years	Female		blaze	None	fetlock	None	fetloc	fetloc	branded (b) (6), (b) (7)(C)
		203	***************************************	22 20010			2222				k	k	
		Dun roan	Quarter Horse	18 Years	Female		star	None	None	None	None	None	
		2. 2											



Date Of Issue Certificate Number

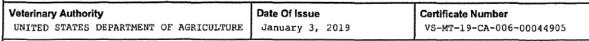
UNITED STATES DEPARTMENT OF AGRICULTURE January 3, 2019 VS-MT-19-CA-006-00044905

Veterinary Authority



1	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
	(b) (6), (b) (7)(C)	Sorrel	Quarter Horse	22 Years	Female	b) (6), (b) (7)(C)	star, strip, snip	None	None	None	None	None	branded(b)(7) hip
		Dun	Quarter Horse	10 Years	Female			None	None	None	fetloc k	None	branded (b) (6), (b) (7)(C) hip
		Bay	Quarter Horse	12 Years	Female		star, sníp	None	coronet	None	None	corone t	
		Buckskin/ white	Paint	11 Years	Neutered Male		blaze	None	white to knee	white to knee	white to hock	white to hock	
		Buckskin	Quarter Horse	20 Years	Female		star, snip	None	None	None	None	None	
		Chestnut	Quarter Horse	20 Years	Female		blaze	None	fetlock		fetloc	None	· · · (b) (6), (b) (7)(C)
		Dun	Quarter Horse	8 Years	Neutered Male		star, strip, snip	None	None	coronet	None	fetloc k	branded branded hip
		Bay	Quarter Horse	3 Years	Neutered Male		star, snip	None	None	None	None	None	(b) (6), (b)
		Blue roan	Quarter Horse	12 Years	Neutered Male		star, strip	None	None	None	corone t	corone t	branded(7)(C)
		Bay	Quarter Horse	8 Years	Female		star	None	None	None	medial corone t	None	branded (b) (b) (b) (7)(C) hip
		Bay	Quarter Horse	10 Years	Female		None	None	None	None	None	None	branded (b) (6), (b) (7)(C)
		Chestnut	Quarter Horse	10 Years	Neutered Male		star, strip, snip	None	None	None	None	None	branded (b) (7) shoulder (C)
		Sorrel	Quarter Horse	10 Years	Neutered Male		star, strip	None		None	None	None	branded
		sorrel	Quarter Horse	13 Years	Female		star, strip	None	None	Иоле	fetloc k	None	







#### Certification Statements:

- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- 3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian	Signature of USDA Veterings (8) (7)(6)
Electronically Signed	Digitally Engorson
Date	Date /
January 3, 2019	January 3, 2019

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a wild CM8 control number. The valid CM8 control numbers for these information collections are 0579-0020, 0036, 0048, 0101, 0156, 0278, and 0432. The times required to complete those information collections is estimated to average 25 to 1.5 hours 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 Approved 0579- 0020, 0036, 0048, 0101, 0156, 0278, and 0432

### Veterinary Health Certificate for Export of Immediate Slaughter Horses from the United States of America to Canada

Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 10, 2019	9	Certificate Number VS-MT-19-CA-006-00045077	
1. Consignor: (b) (6), (b) (7)(C)  , MT (0) (6), (b) (7)  United States		2. Consignee Bouvry E Fort Mac Canada		
3. Country Of Origin: USA		4. State Of Or Montana	igin:	
5. Country Of Destination: Canada		6. Zone Of Do	stination: ************************************	*******
7. Place Of Origin: (b) (6), (b) (7)(C)  , MT (b) (6), (b) (7)(C)			barkatlon/Border Crossing: etgrass – Border Port	
9. Estimated Date Of Shipment: January 14, 2019		10. Means Of Truck	Transport:	
11, ***********************************	******	12. CITES Per	mit Number:	*********
13. Description Of Commodity: Horses		14. Date Of In: 1/9/2019		
15. Total Quantity: 30		<b>16. Additional</b> (See att	Information: ached Additional Information)	
17. Total Number Of Packages/Containers:	* * * * * * * * * * * * * * * * * * * *	******	********	******
18. Identification / Seal Numbers:	*****	******		· *********
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Ac Permanen		
21. Identification Of Commodities:				
(See next page)				
****	*****		****************************	
************	**********	******	**********	*******
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•	The state of the s	10		
	Equine Welfar	e Alliance		

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#### 16. Additional Information: Continued

Veterinary Authority

All horses are branded -S on left shoulder

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	(b) (6), (b) (7)(C)	Bay	Quarter Horse	9 Years	Neutered Male	(b) (6), (b) (7) (C)	star	None	None	None	None	None	L
2		Sorrel	Quarter Horse	10 Years	Neutered Male		star, strip, snip	None	None	None	fetlock	None	
3		Bay	Quarter Horse	10 Years	Neutered Male		star	None	None	None	pastern	None	
4		Black/ white	Paint	17 Years	Neutered Male		star, strip, snip	None	white to knee	white to knee	White to hock	white to hock	
5		Bay/white	Paint	20 Years	Female		blaze	None	white onto body	white onto body	white to hind quarter	white to hind quarter	
6		Sorrel	Quarter Horse	16 Years	Neutered Male		blaze	None	white to knee	white to knee	white to hock	white to hock	
7		Buckskin	Quarter Horse	10 Years	Neutered Male		None	None	None	coronet	fetlock	fetlock	
8		Grey	Quarter Horse	10 Years	Neutered Male		None	None	None	None	None	None	branded (b) (6) (b) (7)(C) (b) (6), (b) (7)(C) thigh
9		Bay	Quarter Horse	10 Years	Female		star, snip	None	None	None	anterior coronet	None	(b) (6), (b)
10		Brown/ white	Paint	23 Years	Neutered Male		star, snip	None	white onto body	white onto body	white to hock	fetlock	branded <mark>(7)(C)</mark> this
11		Sorrel	Quarter Horse	12 Years	Female		star, strip, snip	None	None	None	None	None	
12		Black	Quarter Horse	18 Years	Female		None	None	None	None	fetlock	None	(b) (c)
13		Bay roan	Quarter Horse	6 Years	Female		star, snip	None	None	None	None	fetlock	branded (b) (7) should
14		Red roan/white	Paint	22 Years	Female		blaze, lower lip	None	white to knee	white to knee	white to hook	white to hock	branded (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) hip
15		Chestnut	Quarter Horse	15 Years	Neutered		blaze	None	anterior/	fetlock	white to	white to	





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UNITED STATES DEPARTMENT OF AGRICULTURE

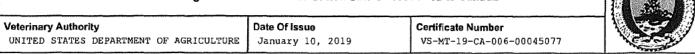
January 10, 2019

VS-MT-19-CA-006-00045077



low	₹D	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
	(b) (6), (b) (7)(C)				Male	(b) (6), (b) (7)(C)			lateral coronet		hock	hock	
16		Bay	Quarter Horse	12 Years	Neutered Male		star	None	None	None	anterior coronat	None	
.7		Perlino	Quarter Horse	9 Years	Female		strip, snip	None	None	None	None	None	(b) (c) (b) (7)(c)
8		Red roan/white	Paint	10 Years	Neutered Male		star, strip, snip	None	white to knee	white to knee	white to hock	white to hock	branded (b) (6), (b) (7)(C) L hip
.9		Grey	Quarter Horse	10 Years	Female		srip	None	None	None	Non∍	None	branded (b) (6), (b) (7)(C)
20		Palomino	Quarter Horse	10 Years	Neutered Male		star	None	None	None	None	None	branded (7)(C) should
21		Chestnut	Quarter Horse	20 Years	Neutered Male		star	None	None	None	None	None	
22		Chestnut	Quarter Horse	10 Years	Female		star, snip	None	None	None	fetlock	coronet	
23		Palomino	Quarter Horse	5 Years	Neutered Mals		blaze	None	None	None	None	None	
24		Chestnut/ white	Appaloosa	5 Years	Weutered Male		None	white over hind quarters	soronet	None	pastern	pastern	
25		Вау	Quarter Horse	5 Years	Female		star, strip, snip	None	None	None	None	None	
26		Red roan	Quarter Horse	20 Years	Female		star	None	None	None	None	None	branded (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) hij
27		Sorrel/ white	Paint	10 Years	Female		star, strip, snip	None	white onto body	white onto body	white to hind quarter	white to hind quarter	
28		Sorrel	Quarter Horse	10 Years	Female		star, strip, snip	None	None	None	None	None	(b) (6), (b) (7)(C)
29		Bay	Quarter Horse	10 Years	Female		star	None	None	None	None	None	branded hip
30		Grey	Quarter Horse	6 Years	Neutered Male		star, snip	None	pastern	None	None	None	







#### Certification Statements:

- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- 2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- 3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian	Signature of USDA Veterina (6) (6) (7)(C)
Electronically Signed	Digitally Endorsed
Date	Date
January 9, 2019	January 10, 2019

OMB Approved 0579- 0020, 0036, 0048, 0101, 0156, 0278, and 0432

### Veterinary Health Certificate for Export of Immediate Slaughter Horses from the United States of America to Canada

Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 10, 2019	9	Certificate Number VS-MT-19-CA-006-00045078	
1. Consignor: (b) (6), (b) (7)(C)  MT 59474  United States		2. Consignee: Bouvry E Fort Mac Canada		
3. Country Of Origin:		4. State Of Ori	igln:	
5. Country Of Destination: Canada		6. Zone Of Des	estination:	
7. Place Of Origin: (b) (6), (b) (7)(C)  MT (b) (6), (b) (7)(C)			barkation/Border Crossing: eetgrass – Border Port	
9. Estimated Date Of Shipment: January 14, 2019		10. Means Of T	Fransport:	
11, <***********************************	*****	12. CITES Per	mit Number:	************
13. Description Of Commodity: Horses		14. Date Of ins 1/9/2019		
<b>15. Total Quantity:</b> 30		<b>16. Additional</b> (See atta	Information: ached Additional Information)	
17. Total Number Of Packages/Containers:	/宋京学业表示文·朱京·西安斯·西安斯·		/***********	************
18. Identification / Seal Numbers:	**********	*******	***************************************	***********
19. Commodities intended Use: Immediate Slaughter		20. Type Of Ad Permanent		
21. Identification Of Commodities:	***************************************			***************************************
(See next page)			**************************************	
4. * * * * * * * * * * * * * * * * * * *				
•				
	Equine Welfar	re Alliance		

Date Of Issue

UNITED STATES DEPARTMENT OF AGRICULTURE January 10, 2019

Certificate Number

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#### 16. Additional Information: Continued

Veterinary Authority

All horses are branded -S on left shoulder

ow	1D	Color	Breed	Age	Sex	Other ID / Head Tattoo	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	(b) (6), (b) (7)(C)	Bay	Quarter Horse	10 Years	Neutered Male	(b)(6)(b)(7)(C) star, strip, snip	None	None	None	fetlock	fetlock	(b) (6)
2		Sorrel	Quarter Horse	10 Years	Neutered Male	star, strip, snip	None	None	fetlock	řetlock	fetlock	branded (b) (7)(C)nip
		Chestnut	Quarter Horse	10 Years	Female	star, strip, snip	None	None	None	fetlock	fetlock	
		Brown	Quarter Horse	10 Years	Female	star, strip, snip	None	None	Xone	fetlock	fetlock	
		Brown/ white	Paint	12 Years	Female	star, strip, snip	None	white to knee	white to knee	white to hock	white to hock	<i>;</i>
		Chestnut	Quarter Horse	10 Years	Female	star, strip, snip	None	paster n	None	fetlock	fetlock	
		Buckskin	Quarter Horse	18 Years	Female	star	None	None	None	fetlock	None	branded (C) (b) (7) thig
		Palomino	Quarter Horse	10 Years	Female	blaze, lower lip	None	fetloc k	fetlock	fetlock	fetlock	
		Bay	Quarter Horse	15 Years	Neutered Male	star	None	None	None	None	pastern	
		Chestnut	Quarter Horse	10 Years	Female	star, strip, snip	None	None	None	None	None	
		Dun	Quarter Horse	10 Years	Female	None	None	None	None	None	pastern	
		Sorrel	Quarter Rorse	11 Years	Neutered Male	blaze	None	None	None	pastern	fetlock	
		Вау	Quarter Horse	23 Years		star	None	None	None	medial coronet	None	(b) (6) (b) (7)(C)
į		Chestnut	Quarter Horse	12 Years	Female	blaze	None	None	None	fetlock	fetlock	branded (b) (b) (7)(c)
5		Вау	Quarter Horse	10 Years	Neutered	star,	None	None	None	fetlock	fetlock	(b) (6), (b) (7)(C)





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 January 10, 2019
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Bay Quarter Horse 10 Years Neutered strip, anip buttock  Red dun Quarter Horse 5 Years Female blaze None None None None None None None Non	bw	1D	Color	Breed	Age	Sex	Other ID / Head Tattoo	Body	Limb LF	Limb RF	Lìmb LH	Limb RH	Add. Desc.
Bay Quarter Horse 10 Years Newtered atain, some None None None None None None Start None None None None None None None None		(b) (6), (b) (7)(C)				Male	b) (b), (b) (7)(C) snip		·				(b) (6) (b) (7)(C)
Bay Quarter Horse 10 Years Neutered Star, None None None None Fetlock Star, None Star, None None None Fetlock Star, None Star, None None None Fetlock Star, None Star, None None None None None None None None	16		Вау	Quarter Horse	10 Years	Female	star,	None	fetloc	fetlock	fetlock	fetlock	Digitala
Bay   Quarter Horse   10 Years   Neutered   Male   Start,   None   Non								,	k				111,50
Red dun Quarter Horse 8 Years Fenale blaze None paster None None None 19 Bay Quarter Horse 10 Years Neutered Male hairs on forehead blaze None None None None fetlock  Sorrel Quarter Horse 10 Years Female blaze None None None None fetlock  Black/ Paint 12 Years Female blaze None white onto body hind quarter quarter white apots None white to onto body hind quarter white apots Sorrel Quarter Horse 10 Years Female blaze None None None fetlock  Sorrel Quarter Horse 10 Years Neutered Male Star White spots None None fetlock None None None Sorrel Quarter Horse 15 Years Female star, None fetlock Sorrel Quarter Horse 10 Years Female Star, None fetlock Sorrel Quarter Horse 10 Years Female Star, None paster None hook hook None None None None Sorrel Quarter Horse 10 Years Female Star, None fetlock Sorrel Quarter Horse 10 Years Female Star None None None None None fetlock Sorrel Quarter Horse 10 Years Female Star None None None None None fetlock Sorrel Quarter Horse 10 Years Female Star None None None None None fetlock Sorrel Quarter Horse 10 Years Female Star None None None None fetlock fetlock Sorrel Quarter Horse 10 Years Female Star None None None None fetlock fetlock Sorrel Quarter Horse 10 Years Female Star None None None None fetlock fetlock Sorrel Quarter Horse 10 Years Female Star None None None fetlock fetlock Sorrel Quarter Horse 10 Years Female Star None None None fetlock fetlock Sorrel Quarter Horse 10 Years Female Star None None None fetlock fetlock fetlock Sorrel Quarter Horse 10 Years Female Star None None None fetlock fetlock fetlock Sorrel Quarter Horse 10 Years Female Star None None None fetlock fetlock fetlock Sorrel Quarter Horse 10 Years Female Star None None None fetlock fetlock fetlock Sorrel Quarter Horse 10 Years Female Star None None None fetlock fetlock fetlock Sorrel Sorrel Quarter Horse 10 Years Female Star None None None fetlock fetlock fetlock Sorrel Sorrel Sorrel Sorrel Sorrel Sorrel None None Female Star None None fetlock fetlock Sorrel Sorrel Sorrel Sorrel Sorrel Sorrel Sorrel Sorrel Sorrel					_								buttock
Red dun Quarter Horse 8 Years Fenale blaze None paster None None None 19  Bay Quarter Horse 10 Years Newtered Male hairs on forehead blaze None None None None Pastern Pastern Pastern Pastern None None None None Pastern Pastern Pastern Pastern None None None None Pastern Pastern Pastern Pastern Pastern Pastern None None None None None None None Non	17		Bay	Quarter Horse	10 Years				None	None	None	retiock	
Red dun Quarter Horse 8 Years Female blaze None paster None None None Pastern None						WaTe		•					
Bay Quarter Horse 10 Years Neutered Male hairs on forehead blaze None None None None fetlock  20 Sorrel Quarter Horse 10 Years Female blaze None None None None fetlock  21 Black/ white hairs on forehead blaze None None None fetlock  22 Chestnut/ Appaloosa 8 Years Neutered Wale Sorrel/ White spots Sorrel/ White Sorrel Quarter Horse 10 Years Female Sorrel Sorrel Quarter Horse 15 Years Female Sorrel Sorrel Quarter Horse 10 Years Female Star, None Fetloc Fetlock Fetlock  23 Sorrel Quarter Horse 10 Years Female Star, None Fetloc Fetlock Fetlock  24 Salack Quarter Horse 15 Years Female Star, None Fetloc Fetlock Fetlock Sorrel Quarter Horse 15 Years Female Star, None Fetlock None Fetlock Sorrel Quarter Horse 10 Years Female Star, None Fetlock None Fetlock Sorrel Quarter Horse 10 Years Female Star, None Fetlock None Fetlock Sorrel Quarter Horse 10 Years Female Star, None None None None Fetlock Fetlock Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Quarter Horse 10 Years Female Star None None None Fetlock Fetlock Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Chestnut Quarter Horse 10 Years Female Star None None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Sorrel Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Sorre	1.2		Davi dun	Cuartar Carea	9 Vn., un	Famala		Vone	-inchas	\"ana	Mone	More	
Bay Quarter Horse 10 Years Neutered Male hairs on forehead 10 None None None None None None Pastern branded No. 10	10		kea aan	Quarter norse	o rears	tenare	01,025	None		Kone	None	Notice	
Sorrel Quarter Horse 10 Years Female blaze None None None white onto body hind quarter Appaloosa 8 Years Nale blaze None None None None fetlock  Chestnut white apots Scrrel/ white Alack Quarter Horse 10 Years Female blaze None None None Screl Quarter Horse 10 Years Female blaze None None Fetlock Fetlock Scrrel Quarter Horse 10 Years Female blaze None None None Screl Quarter Horse 10 Years Female blaze None None None None Fetlock Fetlock Fetlock Fetlock Screl Quarter Horse 10 Years Female blaze None None None None Fetlock Fetlock Fetlock Fetlock Fetlock Screl Quarter Horse 10 Years Female blaze None None None None Fetlock Fetlock Fetlock Fetlock Fetlock Fetlock Fetlock Fetlock Screl Quarter Horse 10 Years Female Blaze None None None None Fetlock Fet	19		Bav	Quarter Horse	10 Years	Neutered	white	None		None	pastern	pastern	branded (b) (6), (b) (7)(0
Sorrel   Quarter Horse   10 Years   Female   Star   None   None   None   None   None   Star			,	£			hairs	on					(b) (6), (b) (7) should
Black/ Paint 12 Years Female blaze None white white onto body hind quarter white spots None None fetlock white to white to white to hind quarter white spots None None fetlock None None fetlock white to white to white to hind quarter white spots None None fetlock None None fetlock None None Sorrel/ Paint 10 Years Neutered Male None None None None None None None Non							forehe	ad					(C)
White  Chestnut/ Appaloosa 8 Years Neutered white spots white spots spots Screel/ Paint 10 Years Neutered Male  Sorrel/ Paint 10 Years Neutered Male  Black Quarter Horse 15 Years Female Star, None Setlock Fetlock  Chestnut Quarter Horse 10 Years Female Star, None None None None None None Sorrel Quarter Horse 10 Years Female Star, None None None None None Setlock Fetlock  Chestnut Quarter Horse 10 Years Female Star None None None None Fetlock  Sorrel Quarter Horse 10 Years Female Star None None None None Fetlock  Chestnut Quarter Horse 10 Years Female Star None None None Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Quarter Horse 10 Years Female Star None None Sorrel Quarter Horse 10 Years Female Star None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None Sorrel	20		Sorrel	Quarter Horse	10 Years	Female	blaze	None	None	None	None	fetlock	
White  Chestnut/ Appaloosa 8 Years Neutered white spots white spots spots Screel/ Paint 10 Years Neutered Male  Sorrel/ Paint 10 Years Neutered Male  Black Quarter Horse 15 Years Female Star, None Setlock Fetlock  Chestnut Quarter Horse 10 Years Female Star, None None None None None None Sorrel Quarter Horse 10 Years Female Star, None None None None None Setlock Fetlock  Chestnut Quarter Horse 10 Years Female Star None None None None Fetlock  Sorrel Quarter Horse 10 Years Female Star None None None None Fetlock  Chestnut Quarter Horse 10 Years Female Star None None None Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Quarter Horse 10 Years Female Star None None None Sorrel Quarter Horse 10 Years Female Star None None Sorrel Quarter Horse 10 Years Female Star None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None Sorrel Sorrel Quarter Horse 10 Years Female Star None None Sorrel													
Chestnut/ Appaloosa 8 Years Neutered Male  Sorrel/ Paint 10 Years Neutered Male  23 Sorrel Quarter Horse 10 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Sorrel Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Sorrel Sor	21			Paint	12 Years	Female	blaze	None					
Chestnut/ Appaloosa 8 Years Neutered white spots throughout body Sorrel/ Paint 10 Years Neutered Male  23 Sorrel/ Paint 10 Years Neutered Male  24 Black Quarter Horse 10 Years Female Star, None Mone None None occupied fetlock  25 Sorrel Quarter Horse 15 Years Female Star, None None None None Mone fetlock  26 Chestnut Quarter Horse 10 Years Female Star, None None None None fetlock  27 Sorrel Quarter Horse 10 Years Female Star None None None None fetlock  28 Sorrel Quarter Horse 10 Years Female Star None None None fetlock  29 Brown Quarter Horse 10 Years Female Star None None None fetlock fetlock  20 Chestnut Quarter Horse 10 Years Female Star None None None fetlock fetlock  28 Sorrel Quarter Horse 10 Years Female Star None None None fetlock fetlock  29 Brown Quarter Horse 10 Years Female Star None None None fetlock fetlock fetlock  20 Chestnut Quarter Horse 10 Years Female Star None None None fetlock fetlo			whrte							pogž			
white spots  Sorrel/ Paint 10 Years Neutered Nale  Sorrel/ Paint 10 Years Neutered Nale  Paint 10 Years Neutered Nale  Sorrel Paint 10 Years Neutered Nale  Male  Diaze None white white onto white to white to onto body hook hind quarter  None None None Coronet None  Sorrel Quarter Horse 15 Years Female  Chestnut Quarter Horse 9 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Sorrel Sor	22		Chagtaut/	Appalages	g vones	Noutored	a + a e	white enote	•	None	-	-	
Spots Sorrel/ Paint 10 Years Neutered Male  Diaze None white white onto white to white to hind onto body hook hind quarter  24 Black Quarter Horse 10 Years Female Sorrel Quarter Horse 15 Years Female  Chestnut Quarter Horse 9 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Sorrel Sorr	2.6			apparousa	o lears		3642		2016	,,0112	20040011	110110	
Sorrel/ Paint 10 Years Neutered Male  Sorrel/ White white onto white to white to body body body body body body body bod													
White  Male  Black Quarter Horse 10 Years Female  Sorrel Quarter Horse 15 Years Female  Chestnut Quarter Horse 9 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Chestnut Quarter Horse 10 Years Female  Sorrel Quarter Horse 10 Years Female  Sorrel Sorrel Quarter Horse 10 Years Female  Sorrel Sorrel Quarter Horse 10 Years Female  Sorrel Sorre	23			Paint	10 Years	Neutered	blaze		white	white onto	white to	white to	
24 Black Quarter Horse 10 Years Female 25 Sorrel Quarter Horse 15 Years Female 26 Chestnut Quarter Horse 9 Years Female 27 Sorrel Quarter Horse 10 Years Female 28 Sorrel Quarter Horse 10 Years Female 29 Sorrel Quarter Horse 10 Years Female 29 Chestnut Quarter Horse 10 Years Female 20 Sorrel Quarter Horse 10 Years Female 21 Sorrel Quarter Horse 10 Years Female 22 Sorrel Quarter Horse 10 Years Female 23 Sorrel Quarter Horse 10 Years Female 25 Sorrel Quarter Horse 10 Years Female 26 Sorrel Quarter Horse 10 Years Female 27 Sorrel Quarter Horse 10 Years Female 28 Sorrel Quarter Horse 10 Years Female 29 Sorrel Quarter Horse 10 Years Female 30 Chestnut Quarter Horse 19 Years Female 30 Sorrel Quarter Horse 19 Years Female 31 Sorrel Quarter Horse 19 Years Female 32 Sorrel Quarter Horse 19 Years Female 33 Sorrel Quarter Horse 10 Years Female 34 Sorrel Quarter Horse 10 Years Female 35 Sorrel Quarter Horse 10 Years Female 36 Sorrel Quarter Horse 10 Years Female 37 Sorrel Quarter Horse 10 Years Female 38 Sorrel Quarter Horse 10 Years Female 39 Sorrel Quarter Horse 10 Years Female 30 Sorrel Quarter Horse 10 Years Female			white			Male				body	hoak	hind	
Sorrel Quarter Horse 15 Years Female star, None fetloc fetlock fetlock fetlock strip, snip  26 Chestnut Quarter Horse 9 Years Female blaze None paster None white to fetlock hock  27 Sorrel Quarter Horse 10 Years Female star None None None None fetlock  28 Sorrel Quarter Horse 10 Years Female blaze None None None fetlock  29 Brown Quarter Horse 8 Years Female star None None anterior/ fetlock fetlock  30 Chestnut Quarter Horse 19 Years Female star, None None None fetlock fetlock									-				
Strip, snip  Chestnut Quarter Horse 9 Years Female blaze None paster None white to fetlock  Sorrel Quarter Horse 10 Years Female star None None None fetlock  Sorrel Quarter Horse 10 Years Female blaze None None None fetlock  Brown Quarter Horse 8 Years Female star None None anterior/ fetlock fetlock  Chestnut Quarter Horse 19 Years Female star, None None None fetlock fetlock	24		Black	•									
Sorrel Quarter Horse 10 Years Female star None None None fetlock  Sorrel Quarter Horse 10 Years Female blaze None None None fetlock  Sorrel Quarter Horse 10 Years Female blaze None None None fetlock  Brown Quarter Horse 8 Years Female star None None anterior/ posterior coronet  Chestnut Quarter Horse 19 Years Female star, None None None fetlock fetlock	25		Sorrel	Quarter Horse	15 Years	Female				fetlock	fetlock	fetlock	
Chestnut Quarter Horse 9 Years Female blaze None paster None white to fetlock hock  27 Sorrel Quarter Horse 10 Years Female star None None None None fetlock  28 Sorrel Quarter Horse 10 Years Female blaze None None None fetlock  29 Brown Quarter Horse 8 Years Female star None None anterior/ fetlock fetlock  30 Chestnut Quarter Horse 19 Years Female star, None None None fetlock fetlock									k				
Sorrel Quarter Horse 10 Years Female star None None None None fetlock  Sorrel Quarter Horse 10 Years Female blaze None None None fetlock  Sorrel Quarter Horse 10 Years Female blaze None None anterior/ fetlock fetlock  Brown Quarter Horse 8 Years Female star None None anterior/ posterior coronat  Chestnut Quarter Horse 19 Years Female star, None None None fetlock fetlock			41	O	6 W				****	Vana	white to	forlook	
28 Sorrel Quarter Horse 10 Years Female star None None None None fetlock 28 Sorrel Quarter Horse 10 Years Female blaze None None None fetlock fetlock 29 Brown Quarter Horse 8 Years Female star None None anterior/ fetlock fetlock 20 Chestnut Quarter Horse 19 Years Female star, None None None fetlock fetlock	20		Cnestnut	Quarter Horse	s rears	tenare	01920	1 1/01/4	1	20110		1001001	
Sorrel Quarter Horse 10 Years Female blaze None None None fetlock fetlock  Brown Quarter Horse 8 Years Female star None None anterior/ fetlock fetlock  posterior coronet  Chestnut Quarter Horse 19 Years Female star, None None None fetlock fetlock	27		Sarral	Owarter Horse	10 Years	Female	star	None		None		fatlock	
29 Brown Quarter Horse 8 Years Female star None None anterior/ fetlock fetlock posterior coronet  30 Chestnut Quarter Horse 19 Years Female star, None None None fetlock	. /		0011411	2404002 110400									
Brown Quarter Horse 8 Years Female star None None anterior/ fetlock fetlock posterior coronet  Chestnut Quarter Horse 19 Years Female star, None None fetlock fetlock	28		Sorrel	Quarter Horse	10 Years	Female	blaz	e None	None	None		fetlock	
coronet  Chestnut Quarter Horse 19 Years Female star, None None fetlock			Brown	Quarter Horse	8 Years	Female	star	None	None		fetlock	fetlock	
Chestnut Quarter Horse 19 Years Female star, None None None fetlock fetlock													
20 Chillian Edgeradus standa as adored a sugarda												C-13- 1	
	30		Chestnut	Quarter Korse	19 Years	Female		-	None	None	fetlock	retiock	





#### Certification Statements:

- 1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
- The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
  - The animals have resided in the United States or Canada since birth.
- The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
- 4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
- 5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
- 6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian	Signature of USDA (6) (6) (7) (6)
Electronically Signed	Digitally Endor
Date	Date
January 9, 2019	January 10, 2019

According to the Paperwork Reduction Act of 1995, an agency may not canduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for these information collections are 0570-0020, 0036, 0048, 0101, 0156, 0278, and 0402. The times required to complete these information collections is estimated to average .25 to 1.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and everying the collection of information.

OMB Approved 0579-0020, 0036, 0048, 0101, 6155, 0278, and 6432

### Veterinary Health Certificate for Export of Immediate Slaughter Horses from the United States of America to Canada

Veterinary Authority	Date Of Issue		Certificate Number	
UNITED STATES DEPARTMENT OF AGRICULTURE	January 16, 2019	)	VS-MT-19-CA-006-00045247	
1. Consignor:		2. Consignee		
(b) (6), (b) (7)(C)		Bouvry E	xports Leod, Alberta	
MT 59474		Canada	,	
United States				
3. Country Of Origin:		4. State Of Or	gin:	Maria de la constanta de la co
USA		Montana		
5. Country Of Destination:		6. Zone Of De	stination:	
Canada		*****	**********	
7. Place Of Origin:			parkation / Border Crossing:	
(b) (6), (b) (7)(C)		MT - Swe	etgrass - Border Port	
MT (b) (6), (b)				
(/)(C)				
9. Estimated Date Of Shipment:		10. Means Of	[ranenort	
January 21, 2019		Truck	Tall Sports	
11. *************	******	12. CITES Per	mit Number:	
*********	******	****	* * * * * * * * * * * * * * * * * * * *	******
13. Description Of Commodity:		14. Date Of Inc	pection:	
Horses		1/15/19		
15. Total Quantity:		16. Additional		
30		(See att	ached Additional Information)	
17. Total Number Of Packages/Containers:				******
			*****	
18. Identification / Seal Numbers:	* * * * * * * * * * * * * * * * * * * *		**********	******
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Ac		
_		. 0111011011		
21. Identification Of Commodities:				
(See next page)				
***********	******	******	*********	******
***************	********		************	***********
	***			
	A			
	4	(1)		
	Equine Welfar	n Alliance		
	Equine weirar	C / MIIdFICE	•	

Date Of Issue

January 16, 2019

Certificate Number

VS-MT-19-CA-006-00045247



#### 16. Additional Information: Continued

Veterinary Authority

All horses are branded -S on left shoulder

UNITED STATES DEPARTMENT OF AGRICULTURE

٧	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
Ť	(b) (6), (b) (7)(C)	Sorrei	Quarter Horse	10 Years	Female	(b) (6), (b) (7)(C)	blaze	None	fetlock	fetlock	medial	coronet	branded (b) (6), (b) (7)(0
		Bay	Quarter Horse	10 Years	Neutared Male		star	None	None	fetlock	coronet fetlock	coronet	hip
		Вау	Quarter Horse	10 Years			tar, snip	№оле	None	None	fetlock	fetlock	
ı		Chestnut	Quarter Horse	17 Years	Female		star	None	None	None	fetlock	fetlock	
		Palomino	Quarter Horse	10 Years	Neutered Male		blaze, Lower lip	None	None	fetlock	white to hock	white to hock	
		Sorrel/ white	Paint	18 Years	Female		blaze, lower lip			-	white to hind quarter		*
		Sorrel	Quarter Horse	11 Years	Female		star, strip, snip	None	None	pastern	fetlock	fetlock	
ı		Sorrel	Quarter Horse	10 Years	Neutered Male		blaze	None	fetlock	None	medial coronet	pastern	
		Sorrel	Quarter Horse	18 Years	Neutered Male		star, strip, snip	None	white to knee	fetlock	fetlock	coronet	
		Grey/white	Appaloosa	19 Years	Neutered Male		star, strìp, snip	None	fetlock	None	pastern	· fetlock	(b) (c) (b) (7)(c)
ı		Grey	Quarter Horse	7 Years	Female		star	None	coronet	coronet	coronet	pastern	(b) (b), (b) (7)(C)
		Palomino	Quarter Horse	9 Years	Neutered Male		blaze	None	None	None	pastern	white to hock	branded (b) (6), (b) (b) (6), (b) (7)(C)
ı		Blue roan	Quarter Horse	5 Years	Female		star	None	None	None	None	None	
		Sorrel	Quarter Horse	10 Years	Neutered Male		star, snip	None	None	None	None	fetlock	(6) (6) (6) (7)
		Sorrel	Quarter Horse	13 Years	Neutered Male		star, strip, snip	None	fetlock	fetlock	fetlock	fetlock	branded (b) (6), (b) (7) (b) (6), (b) thigh (7)(C)
		Sorrel	Quarter Horse	8 Years	Neutered Male		blaze	None	řetlock	pastern	fetlock	fetlock	



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue

January 16, 2019

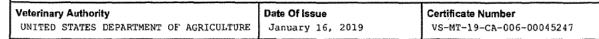
Certificate Number

VS-MT-19-CA-006-00045247



w .	ID	Color	Breed	Age	Sex	Other ID / Head Tattoo	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
	b) (6), (b) (7)(C)	Bay-brown	Quarter Horse	5 Years	Female	b) (6), (b) (7)(C) blaze, lower lip	None	None	None	medial coronet	white to hock	branded (b) (6), (b) (7) R hip
		Sorrel/ white	Paint	20 Years	Female	blaze, lower lip	None	white	white onto body	white to hock	white to hock	
		Buckskin/ white	Paint	12 Years	Female	star, strip	None	white onto body	white to knee	white to hock	white to hock	
		Palomino	Quarter Horse	18 Years	Neutered Male	None	None	None	None	None	None	
		Вау	Quarter Horse	21 Years	Neutered Male	None	None	None	None	None	None	113.403.413
		Bay	Quarter Horse	8 Years	Neutered Male	sníp	None	fetlock	None	fetlock	fetlock	branded (b) (6), (b) (b) (6), (b) (7)(C)
		Sorrel	Quarter Horse	5 Years	Neutered Male	blaze, lower lip	None	fetlock	fetlock	white to hock	white to hock	(b) (6), (b) (7)(C)
		Sorrel	Quarter Horse	10 Years	Neutered Male	star, snip	None	None	fetlock	None	pastern	
		Sorre:	Quarter Horse	20 Years	Female	star, strip	None	None	None	None	fetlock	
		Bay-brown	Quarter Horse	28 Years	Female	star	None	None	None	None	None	
		Brown	Quarter Horse	26 Years	Female	None	None	None	None	None	None	
		Sorrel	Quarter Horse	18 Years	Female	blaze	None	None	None	white to hock	white to hock	
		Bay	Quarter Horse	4 Years	Female	star	None	None	None	coronet	None	
		Sorrel	Quarter Horse	4 Years	Neutered Male	blaze	None	coronet	coronet	None	fetlock	







#### Certification Statements:

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Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.



Name of Accredited Veterinarian	Name of USDA Veterinarian
Laura Keller, DVM	Brian V. Noland, DVM
Signature of Accredited Veterinarian	Signature of USDA Veter(b) (6), (b) (7)(C)
Electronically Signed	Digitally Endorsed
Date	Date
January 16, 2019	January 16, 2019

811

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

## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

According to the Paperwerk Reduction Act of 1995, no premions are required to respond to a collection of information unless if displays a valid OMB control number. The valid OMB control number for this information collection is 1979-0160. The time required to complete this information collection is estimated to average 5 min, per response, including the time for reviewing instructions, searching existing date sources, guithering and maintaining the data needed, and complitting and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

PAGE 1 OF

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PART 1 - INSPECTOR

(AMG 2004)

VS FORW 10-13

# 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.

PORM APPROVED OMB NO. 0579-0160

	TAG	Tag	1		OR DE	SCRIPT	TON			_	EED/TY	_			SEX		BRANDS	REMARKS
	PREFIX	NO.	Bay	Gray	<b>B</b> W.	Pinlo	Glussin	Other	TB	QT	Deaft	Fony	Other	Manu	Stal	Gold	Tations, etc.	Include precondition
16	<b>IENK</b>	o) (6), (b) 7)(C)	6							6				0				
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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 OF BOTH (18 U.S.C. SECTION 1091).

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

(b) (6), (b) (7)(C

## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in lnk)

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

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\$10,1 SIGN	NATURE OF	OWNER	SHIPP	ERITO	tify that	the info	rmation	containe	ed in this f	orm is I	true and	correc	ct to	EST.		_		

# 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 0579-0180. 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. 0579-0160

COLOR DESCRIPTION BREED/TYPE SEX REMARKS TAG Tag BRANDS Include PREFIX NO. Tattoos, etc. Pinto Other Other Stal precondition Bay Grey Blk. Chesin TB QT Draft Pony Mare Geld LARGE RIGHT 16 NSW REAR ANKLE 17 18 19 BAN) Maga 20 BLIND LEFT EYE 21 BRAND BRN 22 23 BRN BNA 24 THE 25 BRAND BRA 26 BAY 27 THW 28 0 NUC 29 BRN 30 MC L18-31 TO BAN 32 PAINT 33 34 10 BRN 35 36 37 38 39 40 41 42 43 Equine Welfare Alliance 44 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 MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

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

## 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

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

(Pleasar 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. If 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 everage 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

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

VS FORM 10-13A (SEP 2002) PAGE 2 OF

# OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in lnk)

According to the Paperwork Reduction Act of 1995, mp persons are required to respond to a collection of information finless if displays a valid OMB control number. The valid OMB control number for this information collection is 9579-9160. The land required to complete this information collection is estending to average 5 min. per response, including the time for reviewing instructions, scarching existing dole sources, gathering and munitarining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

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# 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

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

(b) (6), (b) (7)(C

# OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

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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

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

(b) (6), (b) (7)(C)

PAGE 20F7

## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

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

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 0579-0150. The time required to complete this information collection is satimated 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.

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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).

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

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# 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

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

(b) (6), (b) (7)(C

## 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 8 min, per response, including the time for reviewing instructions, searching existing data sources, gallering and naintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0578-0160

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

(Please type or print in lnk)

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 0379-0160. The time required to complete this information collection is estimated to average 5 min. par 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. 0578-0160

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SIGNATURE OF OWNER/SHIPPER() gently that the information contained in this form is from and correct to the trest of my knowledge.)

(b) (6), (b) (7)(C)

# OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

According to the Paperweik 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 0579-0190. The time required to samplete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching oxiditing data sources, guillering and murifialising the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

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

(Pfease type or print in link)

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

	TAG PREFIX	Tag NO.		COL	OR DE	SCRIPT	TON			BR	EED/N	PE			SEX.	3	BRANDS	REMARKS
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I HEREBY AUTHORIZE THIE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE UISDA. 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 OWNERS HIPPER (neerity that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6), (b) (7)(C)

## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please Type or print in link)

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APPROVED OMB NO. 0579-0160

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# 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 of 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 6 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 DMB NO. 0579-0160

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THEREBY 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 DWNER/SHIPPER(I) entity that the Information contained in this form is true and correct to the best of my knowledge.)

(b) (6), (b) (7)(C

## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in lnk)

According to the Paperwork Reduction Act of 1995, no According to the Paperwork Reduction Act of 1995, 10 persons are required to respond to a callection 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 rise interrequied to complete the interrelated control of the street of the service of the servi

FORM#002 APPROVED OMB NO. 0579-0160 L043191

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE TIME HORSES LOADED ON CONVEYANCE 17/1/219 11.00 Am VEHICLE LICENSE NO. AND DRIVER'S NAME NAME OF AUCTION/MARKE CONSIGNEE (RECEIVEFUDESTINATION) NAME CONSIGNOR (OWNER/SHIPPER) NAME Viande Richelieu Meat Inc. STREET ADDRESS STREET ADDRESS 595 Rue Rovale CITY, STATE, DIP CODE CITY, STATE, ZIP CODE Massueville, QU. Canada AREA CODE & TELEPHONE NO. AREA CODE & TELEPHONE NO 450-788-2490 CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE X Horses are able to bear weight on all 4 limbs. Pregnant mares are not likely to lool (give birth) during the trip. X Horses are able to walk unassisted |X Horses are not blind in both eyes. |X| Foals are older than û months of age. SEX BREED/TYPE BRANDS REMARYS Inches COLOR DESCRIPTION USMY TAG TAG existing conditions Tattoos, etc. Stal Geld PREFIX NO. TB OF Draft. Pony. Other Mare Pinto Chestn Other Grey Blk Bay 3 BR 4 5 6 7 SK B 9 10 11 12 POR CANADIAN FOOD INSPECTION AGENCY (CFIA) HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE EST DATE SIGNATURE TIME I HEREBY AUTHORIZE THE CRIA 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 DIRECCION GENERAL USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN FRONTER. \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001). EST. SIGNATURE OF DWNER/SHIPPER (I certify that the information contamed in this form is true and correct to Equine Welfare Alliance the bast of my knowledge.) DATE TIME

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

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 0.579–0.180. 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.

#002 FORM APPROVED OMB NO. 0579-0160 L043191

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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).

# 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

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# 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

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SIGNATURE OF OWNERSHIPPERINGURBy that the information contained in this form is true and correct to the best of my knowledge.)

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## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in lok

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# 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

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I HEREBY AUTHORIZE THE CRA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CRA 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 OWNERSHIPPER certify that the Information contained in this form is true and correct to the best of my knowledge.)

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### OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in lok)

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

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# 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 velid 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 oristing data sources, gathering and resintaining the data resided, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

BREED/TYPE SEX. COLOR DESCRIPTION REMARKS TAG PREFIX Tog NO. BRANDS Tattoos, etc. Geld precondition Bay Grey Other Pony Other Mare Stat TB Draff CROOKED, RIG US NIT FRONT ABOY 17 BRAND 18 語 19 PAINOT BAY PAIRT 20 21 aug BRANC 22 DARK 23 4 24 O 25 BRAND 20 다 대 대 대 대 27 PAINT 26 BAY 20 THW CHESTA 30 AIN THW 31 BLIND EVE 32 婴 D 34 35 36 37 32 39 40 41 42 43 Equine Welfare Alliance 44 45

I HEREBY AUTHORIZE THE CRA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CRA 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 Propriet that the internation contained in this form is true and correct to the best of my knowledge.)

## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

VS FORMUID-13 [AUG 2004]

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FORM APPROVED OMB NO. 0579-0160

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# 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 mln. 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

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SIGNATURE OF OWNERSHIPPERINGERBY that the information contained in this form is true and correct to the best of my knowledge.)

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## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print In Ink)

According to the Papprwark Reflection 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 0879-0190. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching ousting data sources, gollhamy and maintaining the data needed, and completing and reviewing the collection of information.

FORM APPROVED OMB NO. 0579-0160

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# 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

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SIGNATURE OF OWNER/SHIPPER () carrier that the information contained in this form is line and correct to the liest of my knowledge.)

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## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

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# 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 0.579–0.160. The time required to complete this information collection is estimated to average 5 mm. 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.

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THEREBY 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).

## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

(Please type or print in ink)

According to the Paperwork Regulation Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid CMB control number for this information collection is 6579.0180. The time required to complete this information collection to estimated to average 5 min, per response, including the time for reviewing instructions, searching exciting data isourcus, guithering and maintaining the data needed, and completing and reviewing the collection of information.

APPROVED OMB NO: 0579-0160

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

(Please type or print in lnk)

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

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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 MCIRE 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.)

(b) (6), (b) (7)(C

### 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 control or information orders it displays a valid OMB control number. The valid OMB control number for this information collection is 5579-0160. The time required to complete this information collection is estimated to sverage 5 min. per respicace, including the time for reviewing instructions, searching existing data sources, pathering and maintaining the data needed, and completing and reviewing the collection of information.

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# 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 1895, 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

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

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless if 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 everage .29 hours 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

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## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

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.

#005 FORM APPROVED OMB NO. 0579-0160 L043195

(Please type or print in lnk) L043195 and reviewing the collection of information, TIME HORSES LOADED ON CONVEYANCE CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE 1/2019 NO An Pa. NAME OF AUCTION/MARKET CONSIGNEE (RECEIVER/DESTINATION) NAME CONSIGNOR (OWNER/SHIPPER) NAME Viande Richelieu Meat Inc. STREET ADDRESS STREET ADDRESS 595 Rue Royale CITY, STATE, ZIP CODE CITY, STATE, ZIP CODE Massueville, QU. Canada AREA CODE & TELEPHONE NO AREA CODE & TELEPHONE NO. 450-788-2490 CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE X Horses are able to bear weight on all 4 limbs. Pregnant mares are not likely to foal (ove birth) during the trip. X Foals are older than 5 months of aga. Horses are not blind in both eyes. X Horses are alin to wait anassaire. COLOR DESCRIPTION BREED/TYPE BEX BRANDS REMARKS Include Tag USMY PREFIX NO. Tattoos, etc. existing conditions Geld Grey Pinto Chestn Other TB OT Draft Pany Other Mara Stal 1 2 ma 5013 Soly 5 6 7 В SIN 9 10 5N 11 12 13 14 DA 15 HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE CANADIAN FOOD INSPECTION AGENCY (CFIA) HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE. EST. SIGNATURE DATE TIME 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 DIRECCION GENERAL D USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN **FRONTERAS** \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001). EST. SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and control to the best of my knowledge.) DATE Equine Welfare Alliance TIME

# 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 porsons 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 earnplate this information collection is estimated to average 5 mln. 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.

FORM5 APPROVED OMB NO. 0579-0160 L0 4 3 1 1 9 5

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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 (16 U.S.C. SECTION 1001).

## UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICES STATEMENT OF SERVICES

Export vapspadaphis.ueda.gov

Originating Office

Phone 717-540-2770

Import vapapawaphia.unda.gov

(b) (c), (b) (7)(C)

Control Number: 20421900711

Office Id: APVSFX2042

Service Date(s) Begin: 07-JAN-19 End: 07-JAN-19

Reference NR: L043189

101	Slaughter Animals To Can Or Me	9XVSPX2042VSTMPEXEXPTFX2042	56.00	1.00	56.00
Code	Description	Accounting Code/BOC	Cost	Units	Dollars
		APHIS USE ONLY	Unit	# OF	Total

Total Due s

56.00

Remarks:

L043189

Payment Information

Nfc Id

Date	Ar	nount	Payment Type	Account/Check #
07-JAN-19	ş	56.00	Check	(b) (6), (b) (7)(C)

Attention: Customers with government credit accounts - A consolidated monthly bill will be issued by the USDA, APRIS (signature accepting payment terms is on file). Upon receipt of the monthly bill, mail your payment to: USDA/APRIS, P.O. Box 979039 St. Louis, MO 63197-9000.

Notice to Payer: If payment of this Statement of Service is something other than cash or a US postal Money Order, the Statement of Service will not be considered paid in full until such tender has been cleared. If you have any questions, please contact the originating office listed above.



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FORM 17-140 (MA			40 10	M.L.	2733.5											DX 3-1	tok	255

READ INSTRUCTIONS FROM VS FORM 17-140

U.S. DEPARTMENT OF AGRICULTUR ANIMAL AND PLANT HEALTH INSPECTION S VETERINARY SERVICES	RE .	1,	FIRST C	ONSIGN (b) (7)(C	OFFS NA	ME (tast)	ame, f	rst name, m	idale ini	is/orb	rsiniss	(uman)	additional information.	2. CERTIFICATE NO. FROM VS FORM 17-140 L043189	3. PAGE NO. #001
CONTINUATION SHEET FOR		E	Vi	land	e R	iche	lie	u Mea	at !	Inc				-L043188	2 of
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### **READ INSTRUCTIONS FROM VS FORM 17-140**

This certificate is authorized by law (21 USC 112), while you are not required to respond, no health certificate can be validated unless the data requested is provided. See reverse side for additional information. Form Approved DMB No. 0579-0020 U.S. DEPARTMENT OF AGRICULTURE ial or busines rname) 2. CERTIFICATE NO. PAGE NO. ANIMAL AND PLANT HEALTH INSPECTION SERVICE FROM VS FORM 17-180 #001 VETERINARY SERVICES 16 CONSIGNEE'S NAME L043188 2 of 2 Viande Richelieu Meat Inc. CONTINUATION SHEET FOR NEGATIVE TUBERCULIN BRUCELLOSIS BLOOD NEGATIVE RESULTS OF OTHER TESTS READING SAMPLE COLLECTED UNITED STATES ORIGIN HEALTH CERTIFICATE 48 MRS. 72 HRS. DISEASE DISEASE DISEASE MODIFIED ACCREDITED AREA ITBY 17. FARM ORIGIN TYPE TEST CERTIFIED BRUCELLOSIS TYPE TEST TYPE TEST Owner's name (Last name, Iwo initials, & business name) 18. INDIVIDUAL IDENTIFICATION FREEAREA Owner's street address ID NO. CR Owner's city/lown, state code & zip code AGE SEX BREED DATE DESCRIPTION DATE DATE VAC 1/25 1/50 17100 DATE DATE M 0 USMY 8 SN 1000 SN BOW 10 SN 1344 STAP FISH SOLK BAY SNI STAR UF-RHI FITLOCK 10 N SN F294 SMIPI RILL-ILLI Equine Welfare Alliance 1. All states in which the animals reside in the past twenty one days were free from clinical and epidemiological evidence of vesicular stomatitis 2. In the past twenty one days the horses in this shipment have not been in the states of Texas, New Mexico, Arizona, Utah 3. The animals were inspected by within thirty days preceding the date of importation. 4. The animals were found by to be free from any communicable disease. 5. The animals were to the best of the knowledge and belief of not exposed to any communicable disease within s days preceding the date of inspection 6. The animals at the time of the inspection were found healthy and in a physical condition fit to be transcrited. 7. The exporter has been advised that any deterioration in healthy or physical condition of the animals that may render animals unfit for tranport may result in the shipment to refused entry to Canada. 8. Fit to be transorted means that on the day of inspection no animals has an infirmity illness injury or any other condition that could be aggravated when the animals is being tranported causing the animal to suffer 17.19. The animals has reside in the United States Canada VS FORM 17-140s Previous edition may be used.

(MAR 2005)



### EQUINE CERTIFICATION DOCUMENT

	1.0	have ve	erified tha	t all equin	e Include	d on the Expo	rt Health Certific
number LO4 completed and sign			ccompanie	ed with an	Equine la	nformation D	ocument properl
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Signature of Accred	ted Veterina	rian					
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### OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTED FACIL

U.S. DEPARTMENT OF AGRICA ANIMAL AND PLANT HEALTH INSPECTOR OWNER/SHIPPER CERT FITNESS TO TRAVEL TO A SLAU (Please type or print in in)	THICATE GHTER FACILITY	According to the Payerwork Reduction Act of 1995, no persons are required to respond to a collection of information disless it displays a valid CMB control number. The valid CMB control number for this information collection is 0579-0160. The time reached to complete this information collection is detimated to average 5 morpher response, including the time for twicewing instructions, searching existing data sources, gathering and maintaining this data needed, and completing and traviewing the collection of information.	#001 FORM APPROVED 0MB NO. 0579-0160 L043189
TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CO.	NVEYANCE
VEHICLE LICENSE NO, AND DRIVER'S NAME	7	NAME OF AUCTION/MARKET	
CONSIGNOR (OWNER/SHIPPER) NAMÉ (D)(6), (D)(7)(G)		CONSIGNEE (RECEIVER/DESTINATION) NAME : Viande Richelieu Meat Inc.	
STREET ADDRESS (b) (b) (b) (7)(C)		.595 Rue Royale	
(b) (c), (b) (7) (c)  AREA CODE & TELEPHONE NO. (b) (c), (b) (f) (c)	7)(C)	Massueville, OU. Canada AREA CODE & TELEPHONE NO.	
GREEK THE DOX THAT INDICATES THE FOULDWING	SISTRUE FOR ALL THE	1 450-788-2490 HORSES ON THIS CERTIFICATE	
<ul> <li>Pregnant mares are not likely to foal (give birth)</li> <li>Foals are older than 6 months of age.</li> </ul>	The state of the s	Horses are able to beer weight on all 4 finitis.  Horses are not blind in both eyes.	ble to walk unassisted.

USMY	TAG	Tag		CO	OR DE	SCRIP	TION			B	REED/T	PE			SEX	- 12	BRANDS	REMARKS Include
-	PREFIX	NO.	Bay	Grey	Elk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	Tattoos, etc.	existing conditions
7	b) (6), (b) (7) C)		X										SN			X		
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HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF & CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

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 DR 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 bast of my knowledge.)

CANADIAN FOOD INSPECTION AGENCY (CFIA) EST.

DATE

TIME

TIME.

DIRECCION GENERAL DE FRONTERAS (E

EST.

DATE

Equine Welfare Alliance

VS FORM 10-13 (AUG 2004)

Previous editions are obsolete

PAGE 1 OF 2

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

#001 FORM APPROVED OMB NO. 0579-0160 L043189

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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).

### UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICES STATEMENT OF SERVICES

Originating Office

Phone 717-540-2770 Import vepspacaphia. usda.gov

PA

Export wapspassaphis.usds.gov Control Number: 20421900722

Office Id: APVSFX2042

Service Date(s) Begin: 09-JAN-19 End: 09-JAN-19

Reference NR: L043190

101 51	laughter Animals To Can Or Mx	9XVEFX2042VSIMPEXEXPTFX2042	56.00	1.00	56.00
Code 1	Description	Accounting Code/BOC	Cost	Unite	Dollars
		APHIS USE ONLY	Unit	# of	Total

Total Due 5

56.00

Remarks:

L043190 (CA)

Payment Information

Nfc Id

Date	Ar	nount	Payment Type	Account/Check #
09-JAN-19	\$	56.00	check	(b) (6), (b) (7)(C)

Attention: Customers with government credit accounts - A convolidated monthly bill will be issued by the USDA, APRIS (signature accepting payment terms is on file). Upon receipt of the monthly bill, mail your payment to: USDA/APHIS, P.O. Box 979039 St. Louis, MO 63197-5000.

Notice to Payer: If payment of this Statement of Service is something other than cash or a US postal Money Order, the Statement of Service will not be considered paid in full until such tender has been cleared. If you have any quastions, please contact the originating office listed above.



**READ INSTRUCTIONS FROM VS FORM 17-140** 

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### EQUINE CERTIFICATION DOCUMENT

number L043190 ompleted and signed by	are accor		ncluded on the Expo	
lumber of EIDs that accor	mpany the Health	Gertificate: 30	HORSES	
ignature of Accredited Ve	terinarian	3	÷	1:
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			Date 1/9//	9



#### According to the Paperwork Reduction Act of 1995, no According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information; timless it displays a veiled OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to solinglete this information collection is estimated to average 5 min, per response, including the time for policy in instructions; sediching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. #0.01 U.S. DEPARTMENT OF AGRICULTURE FORM ANIMAL AND PLANT HEALTH INSPECTION SERVICE APPROVED OWNER/SHIPPER CERTIFICATE OMB NO. 0579-0160 L0431-90 FITNESS TO TRAVEL TO A SLAUGHTER FACILITY (Please type or print in ink) CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE DATE TIME HORSES LOADED ON CONVEYANCE NAME OF AUCTION/MARKET VEHICLE LICENSE NO. AND DRIVER'S NAME CONSIGNEE (RECEIVER/DESTINATION) NAME CONSIGNOR (OWNER/SHIPPER) NAME Viande Richelieu Meat Inc. STREET ADDRESS STREET ADDRESS 595 Rue Royale CITY, STATE, ZIP CODE CITY STATE, ZIP CODE Massueville, OU. Canada AREA CODE & TELEPHONE NO. AREA CODE & TELEPHONE NO 450-788-2490 CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE X Horses are able to bear weight on all 4 limbs. Pregnant mares are not likely to foal (give birth) during the trip. X Horses are able to walk unassisted. [X] . Horses are not blind in both eyes. X Foals are older than 6 months of age. REMARKS Include BREED/TYPE SEX BRANDS COLOR DESCRIPTION TAG Tag USMY existing conditions Tattoos, etc. Draft Pony Other Mare Stal Gald Pinto Chesta Other OT PREFIX NO. Bik. TB Grey Bay SN 1 SIV 2 SIN 3 SN 4 5 CB SN 8 9 SOR 11 12 14 15 CANADIAN FOOD INSPECTION AGENCY (CFIA) HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE, DATE SIGNATURE TIME. 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 DIRECCION GENERAL USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN FRONTER \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18.U.S.C. SECTION 1001). EST. SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to Equine Welfare Alliance the best of my knowledge.) DATE

TIME.

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

(Please type or print in lnk)

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### UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICES STATEMENT OF SERVICES

Originating Office

Phone 717-540-2770

Import vspspa@aphis.usda.gov

Export vapapa@aphia.usds.gov

Control Number: 20421900764

Office Id: APVSFX2042

Service Date(s) Begin: 16-JAN-19

End: 16-JAN-19

Reference NR: L043191

101	Slaughter Animals To Can Or Mx	9XVSFX2042VSIMPHXHXPTFX2042	56.00	1.00	56.00
Code	Description	Accounting Code/BOC	Cost	Units	Dollars
		APHIS USE ONLY	Unit	# of	Total

Total Due s

56.00

Remarks: L043191(CA)

Payment Information

NEC Id

An	nount	Payment Type	Account/Check #
s	56.00	Check	(b) (6), (b) (7)(C)
	An \$	Amount \$ 56.00	

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19	U.S. DEPARTMENT OF ANIMAL AND PLANT HEALTH	INSPECTION	URE NISERVICE	7.		_			_	st name, firs:			al or i	enisud	SS name)		D - OMB NO, 05 ERTIFICATE NO		and 0101	
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If more lines are needed	below - use VS Form 17-1.	40A.	/MODIF	FIED ACCRE	DITED AF	REA (TB)		1		CERT	FIED BRIL	CELLO	SIS				0.43			
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- I SERVICE LEVEL CONTROL CONTROL CARD THE VISION

### READ INSTRUCTIONS FROM VS FORM 17-140

This certificate is authorized by law (21 USC 112), while you are not required to respond, no health certificate can be validated unless the data requested is provided. See reverse side for additional information. Form Approved OMB No. 0579-0920 U.S. DEPARTMENT OF AGRICULTURE 1. FIRST CONSIGNORS NAME (last name fest name, middle initial ar pusiness name) 2. CERTIFICATE NO. 3 PAGENO ANIMAL AND PLANT HEALTH INSPECTION SERVICE FROM VS FORM 17-140 #002 VETERINARY SERVICES 16. CONSIGNEE'S NAME L043191 2 of 2 Viande Richelieu Meat Inc. CONTINUATION SHEET FOR NEGATIVE TUBERCULIN BRUCELLOSIS BLOOD NEGATIVE RESULTS OF OTHER TESTS READING SAMPLE COLLECTED UNITED STATES ORIGIN HEALTH CERTIFICATE 46 HRS. 72 HRS. DIBEASE DISEASE DISFASE MODIFIED ACCREDITED AREA (TB)-17. FARM ORIGIN TYPE TEST TYPE TEST CERTIFIED BRUCELLOSIS TYPE TEST Owner's name (Last name, Iwo initials, & business name) 18. INDIVIDUAL IDENTIFICATION Owner's street address ID NO. OR Owner's cityflown, state code & zip code AGE SEX ERCEI DATE DATE DATE DATE DESCRIPTION 1/25 DATE 0 USMY MOH RF POSTSRUI 1 F- 2HC-141 DALHER OH Hack BLAZE- RHU PASTERIO OH SOR PASTERN 8 HOUT RF-LF-141 Chapter. FAY STAR FOH SHIP STRIPE FORT REPOSTERN LETELLER RHE-LHE KENET STOR BLAZE SOR RIHLICHE FETCOCK STAR-SAUP RAL TEXLOCK LAC CORONET MA SOR STAR REAM 1. All states in which the animals reside in the past twenty one days were free from Equine Welfare Alliance clinical and epidemiological evidence of vesicular stomatitis 2. In the past twenty one days the horsese in this shipment have not been in the states of Texas, New Mexico Arizona IItah 3. The animals were inspected by within thirty days preceding the date of importation 4. The animals were found from any communicable disease. 5. The animals were to the best of the knowledge and belief of not exposed to any communicable disease withindays preceding the date of inspection 5. The animals at the time of the inspection were found healthy and in a physical condition fit to be transorted. 7. The exporter has been advised that any deterioration in healthy or physiccal condition of the animals that may render animals until for tranport may result in the shipment to refused entry to Canada. d.Fit to be transorted means that on the day of inspection no animals has an infirmity THE illness injury or any other condition that could be abgravated when the animals is being tranported causing the animal to suffer 9. The animals has reside in the Thit Canada since burth.

VS FORM 17-140a (MAR 2005)

Previous edition may be used.



(b) (6), (b) (7)(C)	EQUINE CERTIFICATION DOCUMENT
	ave verified that all equine included on the Export Health Certificate
number_L043191 completed and signed by the	are accompanied with an Equipe Information Description
Number of EIDs that accompa	any the Health Certificate: 30 HORSES



## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

Please type or print in laki

According to the Paperwork Reduction Act of 1995, no persons are required to assess on collection of information tuless it displays a valid OMB control number. The valid OMB control number for this ignormation collection is 0579-0160. The time required to somplete this information collection is estimated to average 5 miniper response, including the time fair teviewing instructions, seatching ucosing data sources, gathering and maintaining the data needed, and complating and fair formation.

FORM APPROVED OMB NO. 0579-0160 L043191

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# 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 first required to exhipite this information collection is astimated 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.

#002 FORM APPROVED OMB NO. 0579-0160 L043191

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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).

STATEMENT OF SERVICES

Originating Office

Phone 717-540-2770

Import vspspadaphis.usds.gov

Export vapapa@aphis.ueda.gov

Control Number: 20421900799

Office Id: APVSFX2042

Service Date(s) Begin: 23-JAN-19

End: 23-JAN-19

Reference NR: L043192

101 5	Slaughter Animals To Can Or Mx	9XVSFX2042VSIMPEXEXPTPX2042	56.00	1.00	56.00
Code	Description	Accounting Code/BOC	Cost	Units	Dollars
		APHIS USE ONLY	unit	# of	Total

Total Due s

56.00

Remarks: L043192(CA)

		Pay	Nfc Id	
Date	Att	ount	Payment Type	Account/Check #
23-JAN-19	4	56.00	Check	(b) (6), (b) (7)(C)

Attention: Customers with government credit accounts - A consolidated mouthly bill will be issued by the USDA, APHIS (signature accepting payment terms is on file). Upon receipt of the monthly bill, mail your payment to: USDA/APHIS, P.O. Box 979039 St. Louis, MD 63157-9000.

Notice to Payer: If payment of this Statement of Service is something other than cash or a US postal Money Order, the Statement of Service will not be considered paid in full until such tender has been cleared. If you have any questions, please contact the originating office listed above.



semen) (include nos, from all

intached VS Forms 17-140A)

24. NAME OF ENGORSING

Previous edition may be used.

23 Signature of Endooring Federal Veterinarian

VS FORM 17-140 (MAR 98)

**READ INSTRUCTIONS FROM VS FORM 17-140** 

U.S. DEPARTMENT OF AGRICULTUR: ANIMAL AND PLANT HEALTH INSPECTION S VETERINARY SERVICES	E SERVICE		(0) (	b), (b) (7		ME flast	ARTER A	irii name mi	ertettis irali	or o	usinos	name)		2. CERTIFICATE NO. FROM VS FORM 17-140	3. PAGE NO. #003
CONTINUATION SHEET FOR		16	V:			iche	114	eu Mea	at :	Inc				L043192	2 of 2
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## **EQUINE CERTIFICATION DOCUMENT**

(b) (6), (b) (7)(C)	
	_have verified that all equine included on the Export Health Certificate
number LO43192 completed and signed by the o	are accompanied with an Equine Information Document properly
Alternative Values has been seen	04 1/10

Number of EIDs that accompany the Health Certificate: 27- HORSES

Signature of Accredited Veterinarian

(b) (6), (b) (7)(C)

Date 1/23/19



# OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACILITY

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.

#003 FORM APPROVED OMB NO. 0579-0160 L043192

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

(Please type of print in Ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information upless it displays a valld CMB/colleto number. The valid CMB control number for this information celection is 0578-0160. The time required to complete this information celection 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 cellection of information.

#003 FORM APPROVED OMB NO. 0579-0160 T.043192

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I HERBY 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).

STATEMENT OF SERVICES

Originating Office

Phone 717-540-2770

Import vapapa@aphia.usda.gov

PA

Export vapapa@aphis.usda.gov

Control Number: 20421900844

Office Id: APVSFX2042

Service Date(s) Begin: 30-JAN-19

End: 30-JAN-19

Reference NR: L043193

101	Slaughter Animals To Can Or Mx	9XVSFX2042VSIMPEXEXPTFX2042	56.00	2.00	133.00
Code	Description	Accounting Code/BOC	Cost	Unite	Dollars
		APHIS USE ONLY	Unit	# of	Total

Total Due \$

112.00

Remarks:

1043193,1043194

		Pay	ment Information	Nfc Id
Date	A	nount	Payment Type	Account/Check #
30-JAN-19	\$	112.00	Check	(b) (6), (b) (7)(C)

Attention: Customers with government credit accounts - A compolidated monthly bill will be issued by the USDA. APHIS (signature accepting payment terms is on file). Upon receipt of the monthly bill, mail your payment to: USDA/APHIS, P.O. Box 979039 St. Louis, MO 63197-9000.

Notice to Payer: If payment of this Statement of Service is something other than cash or a US postal Money Order, the Statement of Service will not be considered paid in full until such tender has been cleared. If you have any questions, please contact the originating office listed above.



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## READ INSTRUCTIONS FROM VS FORM 17-140

This certificate is authorized by law (21 USC 112), while you are not required to respond, no health certificate can be validated unless the data requested is provided. See reverse side for additional information. Form Approved OMB No. 0579-0020 U.S. DEPARTMENT OF AGRICULTURE FIRST CONSIGNORS NAME (tost name, first name, middle initial or testiness name) 2. CERTIFICATE NO. PAGE NO. ANIMAL AND PLANT HEALTH INSPECTION SERVICE FROM VS FORM 17-140 #004 VETERINARY SERVICES 15. CONSIGNEE'S NAME Viande Richelieu Meat Inc. CONTINUATION SHEET FOR L043193 2 of 2 NEGATIVE TUBERCULIN BRUCELLOSIS ELOCO NEGATIVE RESULTS OF OTHER TESTS READING SAMPLE COLLECTED UNITED STATES ORIGIN HEALTH CERTIFICATE 48 HRS. 72 HRS. DISEASE DISEASE DISEASE MODIFIED ACCREDITED AREA (TB)-17. FARM ORIGIN TYPE TEST TYPE TEST TYPE TEST CERTIFIED BRUCELLOSIS Owner's name (Last name, two initials, & business name) 18. INDIVIDUAL IDENTIFICATION FREE AREA Owner's street address Owner's cityflown, state code & zip code ID NO. DR SEX. BREEK DATE DESCRIPTION DATE DATE 1/25 1/50 7/100 DATE 0 USMY QH PHINT RE- CE- RUL - 6166 QUOSTEE SOR STRIPE LHL CESTIFT QUEIQTER SOR Pu 4 STAR STAKE FROMET BLAZE PASTERN SAR BUK STAR DH API STUR BIK 5748 BLACE LAC VETLOCI Equine Welfare Alliance QH - STAR RELCA-NHE-LHE FETILEK 10 OH SOR - BLAZET RAL-ILL RASTERN 1. All states in which the animals reside in the past twenty one days were free from clinical and epidemiological evidence of vesicular stomatitis. 2. In the past twenty one days the horses in this shipment have not been in the states of Texas, New Mexico, Arizona, Utah. 3. The animalswere inspected by within thirty days preceding the date of importation. 4. The animals were found by to be free from communicable diseease. 5. The animals were to the best of the knowledge and belief of not exposed to any communicable disease within sixty days preceding the date of inspecttion. 6. The animals at the time of the inspection were found healthy and in a physical condition fit to be tranported The exporter has been advised that any deterioration in healthy or physical condition of the animals that may render animals unfit for tranport may result in the shipment to refused entry to Canada. 8. Fit to be transorted means that on the day of inspection no animals has an infirmity illness injury or any other condition that could be addravated when the animals is being orted causing the animal to suffer. 9. The animals has reside in the United States or Canada sine birth VS FORM 17-140a

READ INSTRUCTIONS FROM VS FORM 17-140

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# **EQUINE CERTIFICATION DOCUMENT**

(b) (	6), (b) (7)(C)	
L		e verified that all equine included on the Export Health Certificate
	number_L043193	are accompanied with an Equine Information Document properly
	completed and signed by the o	wner.

Number of EIDs that accompany the Health Certificate: 32 Horses

Signature of Accredited Veterinarian

(b) (6), (b) (7)(c)

Date 1-30-19



#### 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. #004 U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE FORM APPROVED OWNER/SHIPPER CERTIFICATE OMB NO. FITNESS TO TRAVEL TO A SLAUGHTER FACILITY 0579-0160 (Please type or print in ink) L043193 DATE CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE TIME HORSES LOADED ON CONVEYANCE Pa. NAME OF AUCTION/MARKET VEHICLE LICENSE NO. AND DRIVER'S NAME CONSIGNEE (RECEIVER/DESTINATION) NAME CONSIGNOR (OWNER/SHIPPER) NAME Viande Richelieu Meat Inc. STREET ADDRESS STREET ADDRESS '595 Rue Royale CITY, STATE, ZIP CODE CITY, STATE, ZIP CODE Massueville, QU. Canada AREA CODE & TELEPHONE NO. AREA CODE & TELEPHONE NO. 450-788-2490 CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE X Horses are able to bear weight on all 4 limbs. Pregnant mares are not likely to foal (give birth) during the trip. X Horses are able to walk unassisted. X Horses are not blind in both eyes. X Foals are older than 6 months of age. SEX BREED/TYPE COLOR DESCRIPTION BRANDS REMARKS Include TAG existing conditions Tattoos, etc. NO. PREFIX Other Mare Stal Geld Bay Grey Blk. Pinto Chestn Other TB QT Draft Pony PAL Sop DIN Sp 50R. PAL Sap

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

SIGNATURE

USMY

13

14 15

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 of my knowledge.)

CANADIAN FOOD INSPECTION AGENCY (CFIA) EST.

DATE

TIME

DIRECCION GENERAL D FRONTERAS

EST.

Equine Welfare Alliance

DATE TIME

# 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.

#004 FORM APPROVED OMB NO. 0579-0160 L043193

USMY

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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).



# **EQUINE CERTIFICATION DOCUMENT**

(b) (6), (b) (7)(C)	
	have verified that all equine included on the Export Health Certificate
number LO43194 completed and signed by the ow	are accompanied with an Equine Information Document properly
completed and signed by the ow	mer.

Number of EIDs that accompany the Health Certificate: 3/ HORSES

Signature of Accredited Veterinarian
(b) (6), (b) (7)(6)

Sign

Date 1/30/19



## OWNER/SHIPPER CERTIFICATE FITNESS TO TRAVEL TO A SLAUGHTER FACIL

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

FORM 005 APPROVED OMB NO.

(Please type or print in ink)  TIME HORSES LOADED ON CONVEYANCE DATE										1	for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.							
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# 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.

#005 FORM APPROVED OMB NO. 0579-0160 &043194

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## UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICES STATEMENT OF SERVICES

Originating Office

Phone 717-540-2770

Import vepspa@aphis.usds.gov



Control Number: 20421900852

Office Id: APVSFX2042

Export vepspasaphis.ueda.gov

Service Date(s) Begin: 31-JAN-19 End: 31-JAN-19

Reference NR: L043195

101	Slaughter Animals To Can Or Mx	9XVSFX2042VSIHPEXEXPTFX2042	56.00	1.00	56.00
Code	Description	Accounting Code/BOC	Cost	Units	Dollars
		APHIS USE ONLY	Unit	# of	Total

Total Due \$

56.00

Remarks: L043195 (CA)

		Pay	ment Information	Nfc Id
Date	An	nount	Payment Type	Account/Check
31-JAN-19	\$	56.00	Check	(b) (6), (b) (7)(C)

Attention; Customers with government credit accounts - A consolidated monthly bill will be issued by the USDA, APRIS (signature accepting payment terms is on file). Upon receipt of the monthly bill, mail your payment to: USDA/APHIS, P.O. Box 979039 St. Louis, MO 63197-9000.

Notice to Payer: If payment of this Statement of Service is something other than cash or a US postal Money Order, the Statement of Service will not be considered paid in full until such tender has been cleared. If you have any questions, please contact the originating office listed above.



Previous edition may be used.

### READ INSTRUCTIONS FROM VS FORM 17-140

This conflicate is authorized by law (21 USC 112), while you are not required to respond, no health conflicate can be validated unless the data requested is provided. See reverse side for additional information. Form Approved OMB No. 0579-0020 U.S. DEPARTMENT OF AGRICULTURE 2. CERTIFICATE NO. 3 PAGE NO ANIMAL AND PLANT HEALTH INSPECTION SERVICE FROM VS FORM TTERA DE @ of 2 VETERINARY SERVICES 16 CONSIGNEES NAME Viande Richelieu Meat Inc. CONTINUATION SHEET FOR L043195 2 of 2 *NEGATIVE TUBERCULIN* BRUCELLOSIS BLOOD NEGATIVE RESULTS OF OTHER TESTS READING SAMPLE COLLECTED UNITED STATES ORIGIN HEALTH CERTIFICATE 48 HRS. 72 HRS DISEASE DISEASE DISEASE MODIFIED ACCREDITED AREA (TB)-17. FARM ORIGIN TYPE TEST TYPE TEST TYPE TEST CERTIFIED BRUCELLOSIS Owner's name (Last name, two initials, & business name) 18. INDIVIDUAL IDENTIFICATION FREE AREA Owner's street address. Owner's city/lown, state code & ass code ID NO. OR SEX BREED DATE DATE 1/25 DESCRIPTION DATE DATE 1/100 1/50 DATE 0 10 USMY N QH B34-BLAZET RF-RHK-LHL PUSTARIU QH RHC -141 PASTERN GH 136474 OH FLATE 10 F OH BAY STAR LF- RHL FETLOCK N QH ROAL RF- LF- RHL-140 MASTERN N SN 1394 BAY BLATE - RUV - UHL (D)H BLKT STAR IA STRH RA-LA-RHL-LAL QUALTER WINOT-1 W FAST 1. All states in which the animals reside in the past twenty one days were free from Equine Welfare Alliance clinical and epidemiological evidence of vesicular stomatitis. 2. In the past twenty one days the horses in this shidment have not been in the states of Texas, New Mexico, Arizona, Utah. 3. The animals were inspedted by within thirty days preceding the date of importation. 4. The animals were found by to be free from any dommunicable disease 5. The animals were to the best of the knowledge and belief of to any communicable disease within sixty days preceding the date of inspection 6. The animals at the time of the inspection were found healthy and in a physical condition fit to be tranported 7. The exporter has been deterioration in healthy or physical conditionof the animals that may mender animals unfit for tranport may result in the shipment to refused enriv to Canada 2. Fit to be transorted means that on the day of inspection no animals has an infirmity tilness injury or any other condition that could be aggravated when the animals is being tranported causing the animal to suffer 9. The animals has reside in the United States or Canada sine birth

VS FORM 17-140a (MAR 2005)

Previous edition may be used.



## EQUINE CERTIFICATION DOCUMENT

uded on the Export Health Certificate	
ne Information-Document properly	number L043195
	completed and signed by the o
ne Information-Document pro	completed and signed by the o

Number of EIDs that accompany the Health Certificate: 28-HoRSES

Signature of Accredited Veterinarian
(0) (0) (0) (1)(0)
Signature of Accredited Veterinarian

Date 1-30-19



#### 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 05/9-0160. The time required to conglete this information collection is estimated to everage 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. #005 U.S. DEPARTMENT OF AGRICULTURE FORM ANIMAL AND PLANT HEALTH INSPECTION SERVICE. APPROVED OWNER/SHIPPER CERTIFICATE OMB NO. FITNESS TO TRAVEL TO A SLAUGHTER FACILITY 0579-0160 L043195 (Please type or print in Ink) CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE TIME HORSES LOADED ON DONVEYANCE DATE Pa NAME OF AUGTON/MARKET VEHICLE LICENSE NO. AND DRIVER'S NAME CONSIGNEE (RECEIVER/DESTINATION) NAME CONSIGNOR (OWNER/SHIPPER) NAME Viande Richelieu Meat Inc. STREET ADDRESS STREET ADDRESS 595 Rue Royale CITY, STATE, ZIP CODE CITY, STATE, ZIP CODE Massueville, QU. Canada AREA CODE & TELEPHONE NO. AFIEA CODE & TELEPHONE NO 450-788-2490 CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE X Horses are able to bear weight on all 4 limbs. | Pregnant maves are not likely to foal (give birth) during the trip. X Horses are able to walk unassisted X Horses are not blind in both eyes. X Foals are older than 6 months of age. REMARKS Include: SEX BREED/TYPE BRANDS COLOR DESCRIPTION TAG The USMY existing conditions Tattoos, etc. Gald Stall Draft Pany Other Mam QT PREFIX Chestn Other TB NO. Pinto Grey BIK Bay SOR. SOR Sop PAL SN SIV Egg SOR Sor CANADIAN FOOD INSPECTION AGENCY (CFIA) HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE. EST. DATE SIGNATURE TIME. 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 DIRECCION GENERAL USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN FRONTER 510,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001). EST. SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to Equine Welfare Alliance

Previous editions are obsoleto

TIME

PAGE 1 OF

the best of my knowledge.)

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

(Please type or print in lnk).

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.

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