Kansas Department of Agriculture Division of Animal Health 1320 Research Park Dr. Manhattan KS, 66502 (785) 564-6601

KANSAS CERTIFICATE OF VETERINARY INSPECTION

Contact State of Destination for Movement Requirements and Certificate Validity
FOR FOREIGN SHIPMENTS (Outside United States or Leaving United States) USE FEDERAL FORM

	Certificate	Number			
48-CVI					

ENTRY PERMIT #:				Certificate is only valid for 30 days from inspection. OFFICIAL USE ONLY									
INSPECTION DATE: Within 30 days of arrival			SHIPMENT DATE:						The Veterinarian issuing this certificate is accredited and has been authorized to inspect animals and issue certificates.				
CONSIGNOR - Contact Person at Origin				CONSIGNEE - Contact Person at Destination						CARRIER (Transporter)			
First Name Exhibitor's Name Last Name			First Name Last Name						Business Name				
				Kansas State Fair									
									PILOWETSCH (ASIANACA)				
Physical Address of Animals			Physical Address of Animals						Physical Address				
			2000 N. Poplar										
City State	Zin Co	ode Coi	inty	City		State	Zip Code	Coun	ity	City		State Zip Code Phone Number	
City State Zip Code Count			arity					1	ity	Oity	Sity State 2-p Sede There traines		
	11			Hutchinson		KS	67502						
Phone Number Location ID#				Phone N	Location ID	cation ID#			Carrier Purpose of Movement				
SV = 0 - 100	11			1			170						
Consignor's Address (if different	ent)			Consigne	ee's Addres	ss (if differer	it)		Print	Interstate Intrastate			
									Reconsigned	di Tana			
			-0.00		NAME OF TAXABLE	1		0	Service and the service and th	4.05			
Species/Number in Shipme	nt: E	Beef Cattle	# [Dairy Ca	ittle#	Flock/	Herd Accre	dited F	ree For: -	lerd/Flock	#	Current State/Area Status:	
Horses# She			oats#		ne#	Total	erculosis l	Brue	ellosis II	Scranie I	NPIP	Tuberculosis:	
								losis Brucellosis Scra				Brucellosis:	
Cervids# Cal	nine#	Fe	eline#	Oth	er#	Joh	ne's 🔲 Pf	₹\ [_]	CMD [Other (spec	ify)	Other (specify)	
												Carol Aspessiy)	
Disease Certification Stateme	nts											1	
	· Annonnone	ANIIMALID	ENTIFICATION	ON AND TES	TS		Tes	i i		Test:		OTHER TESTS,	
II.	DIVIDOAL	ANIMAL ID	ERTH IOAT	JIN AND TEC	210							VACCINATIONS/TREATMENT	
	2943040404				T T		Rema	arks:	*	Remarks:	1	Consider a productional commence of the consideration of the consideration of the consideration of the consideration of the constant of the co	
=	REGI	STRY NAME	E, NUMBER,	10/84/50									
	DESC	RIPTION O	R OTHER ID	AGE									
OFFICIAL PERMANENT ID	All animals	presented for	test must be lis	sted. M/Y	SEX	BREEI) [DATE	POS/NEG	DATE	POS/NEG	Please list date & product used	
Please list each animal individually													
· · · · · · · · · · · · · · · · · · ·									5	4			
Cattle: -840 tag number													
-NUES tag number												Horses:	
-Tattoo (must have registration papers)												-Accession number	
												-Lab - Test date- valid for 12 months and must remain	
Sheep & Goats:												valid through your last day at the State Fair.	
-Scrapies tag number -Tattoo (must have registration papers)													
-rattoo (must have registration papers)												-VS statement if coming from a	
Swine:												county that has an active case of Vesicular	
-840 tag number												Stomatitis	
-Tattoo (must have registration papers)				1								· ·	
-Ear notch													
Horses:	ELEVAL SANCTON	SIGN ON THE WAS ASSESSED.	Participal de la constant de la cons			11-2500000000000000000000000000000000000	***************	20022522222		****************			
-Written description of horse- must match													
VS form 10-11 (Coggins)													
									1				
OWNER/AGENT STATEMEN	IT IN	VETERINA	RY CERTIF	CATION				d III a ah	ove describe	d animals h	ave been insi	pected by me and that they are not showing	
"The animals in this shipment are	those s	sians of infec	tie	and/or co	mmunicable	disease /eyr	ent where note	d) The	Vision	and results	of tests are in	dicated on the certificate. To the best of my	
certified to and listed on this certif	rtificato moo	meet the state of destination and federal interstate re			ate	s. No further warranty is made or implied.							
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Signature		Signature_							Jale		- Inted Iv	dille	
		ddress						Р	hone Numbe	r		Email	
Date		110	ditation 4.			Stata of	License		the rest of the second		cense#	Finally.	
Date	35	US _b	ditation #: _			State 01	FINGUISE				CO 1100 #		