OWNER STATEMENT - CHANGE OF OWNERSHIP

Current Owner's Premises Number	Number of Sheep	Date Animal or Animals received by Market/Dealership/Buyer
Date Animal or Animals Left Flock	Number of Goats	Market/Dealer/Buyer ID Number or Name and Address

This section needs to be completed at time of tagging and check-in

Current Owner Last First Initial	Flock of Origin* Last First Initial
Street Address	Street Address
City State Zip Telephone Number	City State Zip Telephone Number

*Flock or origin is the flock in which the animal most recently resided in which it either was born, gave birth, or was used for breeding purposes.

List all animals in this shipment that are required to be officially identified

No.	USDA Official Animal ID	ID Type	Other ID	Flock of Birth (If Different Than Flock of Origin)
1		☐ E ☐ I ☐ T		
2		☐ E ☐ I ☐ T		
3		☐ E ☐ I ☐ T		
4		☐ E ☐ I ☐ T		
5		☐ E ☐ I ☐ T		
6		☐ E ☐ I ☐ T		
7		☐ E ☐ I ☐ T		
8		☐ E ☐ I ☐ T		
9		☐ E ☐ I ☐ T		
10		☐ E ☐ I ☐ T		
11		☐ E ☐ I ☐ T		
12		☐ E ☐ I ☐ T		
13		☐ E ☐ I ☐ T		

☐ E - ear tag ☐ I - Implant ☐ T - Tattoo, brand or ear notch

Certification:
I CERTIFY THAT (Please check all that apply):

☐ The animals listed hereon are identified with official USDA ID assigned to the flock of origin by USDA unless identified with individual official ID and listed above or on an attachment.

☐ The animals are identified with a registered brand or ear notch pattern of the flock of origin, the animals were born and have resided in a commercial low risk flock throughout their lives, and the brand inspection certificate is attached.

Owner Signature _____ Date _____

ATTENTION MARKETS, DEALERS, AND BUYERS

This document meets APHIS record-keeping requirements for animals identified prior to arrival at a concentration point. Markets and dealers must keep and retain separate business records that indicate the purchases of the animals listed on this owner statement. For any animal that requires a health certificate, a copy of the health certificate must also be retained.

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