Coshocton County Junior Fair PARENT or LEGAL GUARDIAN

AFFIDAVIT FOR NEVER FED RACTOPAMINE HYDROCHLORIDE (BETA AGONIST) TO SWINE

Fair or Exhibition Site: Cosh	octon County F	air		
Date of Exhibition Movement	of Pigs to Harv	est:		
Total Number of Pigs at this Fa	air or Exhibitior	n under the Re	esponsibility of this Par	rent or Legal Guardian:
PQA+ ID Number of Parent or	Legal Guardiar	1:		
Never Fe	d Ractopamine	e Hydrochlorid	le (beta agonist) to Sw	rine
	Parent or	Legal Guardia	an Affidavit	
l,	, for	the pigs per	aining to this affidavi	t, take responsibility for
relevant practices applied in taffidavit have never been fed to or any generic derivative) from where they were raised while animals from ownership at b written request. Legal Guardian or Parent Name	the beta-agonis n birth to harve under my cor irth to delivery	st ractopamine est. The pigs lis atrol. Applical y for slaughter	e hydrochloride (Paylea sted below can be trac ole documentation tra r will be made availab	an®, Optaflexx®, Engain®, ed back to the location(s) acing movement of these
		Description of	Animals	
Unique Identification at the Fair or Exhibition (Individual Pig ID)	Pig Tattoo Number	Sex of Animal (Gilt or Barrow)	Breed or Color Description	Person Receiving Producer Affidavit
I certify that all stater	nents made he	rein are true t	o the best of my know	vledge.
Signature:		Acres Mariane and American and	Date:	
Printed Name and Title:				VI

Coshocton County Fair PRODUCER TO EXHIBITOR

AFFIDAVIT FOR NEVER FED RACTOPAMINE HYDROCHLORIDE (BETA AGONIST) TO SWINE

ate of Sale of Pigs to Exhibito				
otal Number of Pigs Sold:				
QA+ ID Number of Producer ((seller):		and the second s	*
Never Fe		Hydrochlorid roducer Affida	e (beta agonist) to Sw wit	ine
,	, for	the pigs pert	aining to this affidavi	t, take responsibility for
elevant practices applied in t	heir raising fro	om birth to sa	le date listed above.	I do affirm that the pigs
covered by this affidavit have	e never been i	ed the peta-a	to salo date listed abo	we The nigs listed below
Optaflexx®, Engain®, or any ge can be traced back to the k	eneric derivativ	ro they were	raised while under	my control. Applicable
can be traced back to the ideal documentation tracing mover	scation(s) whe	nimals from o	wnershin at hirth to s	ale date listed above will
ocumentation tracing mover be made available within 24 h			Wileising at on the co o	
be made available within 24 n	ours upon win	ten request.		
Destal Addres	as Dhana and	Email Addrass		
Producer Name, Postal Addre	ss, Phone and	Email Address		
Producer Name, Postal Addre	ss, Phone and	Email Address		
		Email Address		
Producer Name, Postal Addre		Email Address		
		Email Address		
Producer Name, Postal Addre				-
		Email Address Description of		
				Person Receiving Producer Affidavit
Unique Identification at time of Sale	Pig Tattoo	Description of Sex of Animal (Gilt or	Animals Breed or	1
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Unique Identification at time of Sale	Pig Tattoo	Description of Sex of Animal (Gilt or	Animals Breed or	1
Unique Identification at time of Sale	Pig Tattoo Number	Description of Sex of Animal (Gilt or Barrow)	Breed or Color Description	Affidavit
Unique Identification at time of Sale (Individual Pig ID) I certify that all stater	Pig Tattoo Number	Description of Sex of Animal (Gilt or Barrow)	Breed or Color Description	Affidavit