## **BEEF**

## 4-H/FFA Animal Care and Management Disclosure Statement

County	Premise ID # (optional)				
Last Name	First Name				
food chain and become edibl regulations involving proper of	First Name				
& FFA fair, or the 4-H divi may be screened for viola	that we have <b>read, understand and will abide by</b> all rules and regulations of the local county 4-H n of the State Fair. We agree to the condition that these exhibit animals (identified on this form) e residues and foreign substances. Also, as a condition of entry, exhibitor agrees to a background ration from other livestock shows				
> We have completed the T	tment Records information on the back of this form for any injectable, water, or feed medication, that has been administered to exhibit animals. Use of these products may require additional				
> We certify that our exhibi	nimals have completed any withdrawal time relative to the administration of any legal drug, vaccine In compliance with applicable FDA and USDA regulations (and similar state regulations) concerning				
We certify that these exh applicable, the requirement	animals have not received drugs that are not in compliance with label indications or, if softhe regulations codifying the Animal Medicinal Drug Use Clarification Act amendment to the				
> If violations are detected,	nimals have not received drugs that are not in compliance with label indications or, if find the regulations codifying the Animal Medicinal Drug Use Clarification Act amendment to the etic act (under the direction of a valid Veterinary/Client/Patient relationship). Operiate state and federal authorities will be notified, and regulatory action can be expected. A penalties as determined by show management.  Instantial Drug and Cosmetic Act (none of the livestock described here aning of the Federal Food, Drug and Cosmetic Act (none of the cattle or sheep have been fed				
Effective 4/1/01 due to co are adulterated within th feed containing protein d 21 CFR 589.2000). We have	erns of BSE. We certify that, to the best of our knowledge, none of the livestock described herein reaning of the Federal Food, Drug and Cosmetic Act (none of the cattle or sheep have been fed any yed from mammalian tissues, such as meat and bone meal from ruminants, not in compliance with purchase invoices and labeling for all feeds containing animal protein products. Copies of these				
> Effective 7/2014: We cert	the listed animals have not received any form of zilpaterol hydrochloride (Zilmax, Showmaxx, or				
	fy the listed animals have been raised using Beef Quality Assurance principles.  nation provided is correct and accurate, and that we have read and understand these				
regulations and may be re	d upon by any person or entity accepting my (our) animal(s) for harvest.				
Owner / Exhibitor Signature	Parent or Guardian Signature				
Date					
Market Beef ear tag number(					

## **Individual or Pen Animal Treatment Records**

Anima I ID or Pen Locati on	Treatme nt Date	Product Name	Amount of Drug Given (cc, water or feed concentrat ion)	Route (feed, water injectable by IM or SQ, topical)	Remarks/In itia Is or Who Administer ed	Withdraw al Time Needed Before Harv est	Date Withdrawal Completed