

Market Goat Health Record



Youth Producer:
 Name: _____
 Address: _____

 Phone: _____
 QA Program: _____
 Date Certified: _____
 Fair: _____

Animal Information (Obtain from producer):
 Identification #: _____ Scrapie ID #: _____
 Breed: _____ Sex: _____
 DOB: _____ Castration Date: _____
 Date Dehorned: _____
 Date Weaned: _____ Sire ID: _____
 Born in: _____ (Country)

Date Purchased: _____
Purchased From (Breeder):
 Name: _____
 Address: _____

 Phone: _____
 QA Certification: _____
(not required)
 Date Certified: _____

“Produce healthy and safe chevon products by being a knowledgeable and responsible producer”

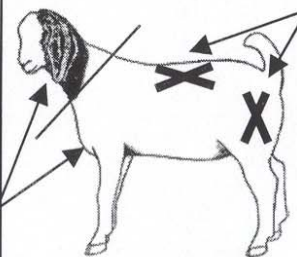
Treatments & Dewormers (Date & Time)	Condition Being Treated	Estimated Weight	Treatment Administered (Medication dispensed, amount and route of administration)	Drug's Lot Number	Name (Person giving treatment)	Withdrawal Time (Instructed)	Withdrawal Complete (Date & Time)	For prescription or extra label drug use, list the veterinarian's name, address, and phone.

Medicated Feeds *Remember to document ALL medicated feeds and withdrawal times*

Dates Fed	Medication Name (Medication added/included in feed and approximate amount of medication)	Withdrawal Time (Instructed)	Withdrawal Complete (Date & Time)

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Give **Subcutaneous (Sub-Q) injections** under loose skin of neck or front flank using tented method. Give **Intra-muscular (IM) injections** in the neck. If label indicates a choice, use **Sub-Q** (under the skin) injections.



NEVER-
Inject into the leg or loin area.

I certify that I produced this animal, it was not fed any “prohibited” mammalian protein (i.e. meat & bone meal), per FDA regulation, CFR Title 21, and I have listed ALL products and treatments they received while in my care and all withdrawal times have been met.

Youth Signature: _____ Date: _____
 Guardian Signature: _____ Date: _____

Youth Producer's Copy

Prepared by: Sarah M. Smith, Jan Busboom, Jean Smith, and Susan Kerr, WSU

Country of Origin Affidavit/Declaration Statements
(Cool Affidavit)

Countinuous Country of Origin Affidavit/Declaration: *(This following affidavit could be used by any operation in the livestock chain attesting to the Country of Origin of livestock but particularly for first-level producers.)*

As an affidavit is deemed by USDA as an official record of Country of Origin, I attest through first-hand knowledge, normal business record, or producer affidavit(s) that all livestock referenced by this document or other communications specific to the transaction and transferred are of _____ origin. Should the origin of my livestock become other than that described above, I agree to notify the buyer/agent when this occurs.

This affidavit/declaration shall remain in effect until revoked in writing by the undersigned and is delivered to _____ (agent/buyer).

Ear Tag # _____

Signature

Date

Business/Farm/Ranch Names/Location