## Owner Hauler Statement for Lactating Dairy Cow Transport to Slaughter



Owner		Hauler (if different)	
Name:		Name:	
Address:		Address:	
City, State Zip:		City, State, Zip:	
Phone:		Phone:	
Premises ID:		Date of Movement:	
Origin Location (if different from owner)		Destination	
Name:		Name:	
Address:		Address:	
City, State Zip:		City, State, Zip:	
Phone:		Phone:	
# Animals	Breed	Class	
List official IDs and/or back tag numbers for all animals on shipment:			

Owner/Hauler Statement			
These cattle do not have clinical signs of highly pathogenic avian influenza or originate from a herd diagnosed with HPAI in the last 30 days.			
Signature:	Date:		

E-mail a copy of this to both the origin and destination states at the email addresses listed above.