



Sheboygan County Meat Animal Sale

P.O. Box 115 • Plvmouth. WI 53073

MARKET ANIMAL DRUG HISTORY- SWINE PROJECT

Exhibitor Names _____

Ear Tag Numbers _____

Part 1:

Product Administered

Date

Product Administered	Date
_____	_____
_____	_____
_____	_____

I hereby certify that this animal has not received, or been treated with drugs, tranquilizers, diuretics, steroids, antibiotics or other substances without following current withdrawal procedures. As a condition for participation in the Sheboygan County Meat Animal Sale, every consignor must agree to submit any animal entered by consignor to inspection by a veterinarian and agrees to have such animal submitted to any tests as may be designated or requested by the veterinarian, and agrees that the conclusions reached by the veterinarian as to whether such animal is unethically fitted to be final. Tissue, urine, hair and/or blood samples or carcass evaluations that yield a positive answer to tampering or an unethical practice will be sufficient evidence to remove the rights and privileges of exhibitor(s) and auction proceeds.

Part 2: *My signature on this form indicates that the animals I am exhibiting which are eligible for the Meat Animal Sale have not been fed Paylean (ractopamine). I understand that if my animals are tested and found to have the presence of Ractopamine I am liable for the cost of my animal back to the buyer and am subject to ineligibility for the current year and future Meat Animal Sale Auctions.*

Print Name:

Signature:

Exhibitor 1. _____

Exhibitor 2. _____

Exhibitor 3. _____

Exhibitor 4. _____

Signature of Parent/Guardian _____ Date _____