

4-H Animal Care and Management Disclose Statement
***Country of Origin *Prohibited Feed & Antibiotic *Treatment Record**

Name _____

- As a youth livestock producer, I understand that I have an obligation to be a responsible producer and that all animals will enter the food chain and become edible food products for the consuming public. This subjects every exhibit animal to all state and federal regulations involving proper drug usage and all Food & Drug Administration, Animal Plant Health Inspection Service, Food Safety Inspection Service and Environmental Protection Agency regulations.
- We, the undersigned, certify that we have **read, understand and will abide** by all rules and regulations at the county 4-H & FFA fair and of the Norfolk Beef Expo. We agree to the condition that these exhibit animals (identified on this form) may be screened for violate residues and foreign substances.
- We have completed the Treatment Records information on the back of this for any injectable, water, or feed medication, pesticide or other substance that has been administered to exhibit animals. Use of these products may require additional time to meet legal withdrawal limits before harvest.
- We certify that our exhibit animals have completed any withdrawal time relative to the administration of any legal drug, vaccine or other substance, and are in compliance with applicable FDA and USDA regulations (and similar state regulations) concerning drug residues and withdrawal periods.
- We certify that these exhibit animals have not received drugs that are not in compliance with label indications or, if applicable, the requirements of the regulations codifying the Animal Medicinal Drug Use Clarification Act amendment to the Federal Food, Drug, and Cosmetic act (under the direction of a valid Veterinary/Client/Patient relationship). All antibiotics are used under the auspices of a veterinarian comply with FDA regulations and not used solely for the purpose of growth promotion.
- In the “finishing ration” have not been “prohibited” mammalian protein (i.e. ruminant meat and bone meat) as defined by FDA CFR 589 2000.
- If violations are detected, appropriate state and federal authorities will be notified, and regulatory action can be expected.
- By signing below I/we hereby certify that all animals listed below were born and raised in the United States and have maintained the appropriate records to provide as proof of origin. We have followed all COOL compliance guidelines, and have maintained the appropriate records to provide as proof of country of origin.
- We further certify the information provided is correct and accurate, and that we have read and understand these regulations and may be relied upon by any person or entity accepting my (our) animal(s) for harvest.

Owner's/Exhibitor's Signature

Parent or Guardian's Signature

Date _____

Market Beef County ear tag number (s) _____

Individual or Pen Animal Treatment Records

Animal ID or Pen Location	Treatment Date	Product Name	Amount of Drug give (cc, water or feed concentration)	Route (feed, water injectable by IM or SQ topical)	Remarks/Initials or Who Administered	Withdrawal Time Needed Before Harvest	Date Withdrawal Completed

These cattle have not received any form of Zilpaterol hydrochloride (Zilmax, Showmaxx, or any other formulation).

Signature of 4-H'er