

RECORD 11B: SAMPLE LETTER OF GUARANTEE / SHIPPING RECORD (FS27)

Seller's Name (person or company): _____

Buyer / Recipient's Name (person or company): _____

Date Shipped: _____

Animal Identification Number(s): _____

Do any of the animals listed above have pending milk or meat withdrawal times or broken needles?

- No Yes

If yes, fill in the following table:

| Animal ID | Date of Treatment | Product | Dose (✓) | | Completed Withdrawal Date | | Broken Needle? If yes, describe site |
|-----------|-------------------|---------|--------------------|-------------|---------------------------|------|---|
| | | | According to label | Extra label | Milk | Meat | |
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I, the seller, have:

- Owned the animal(s) being sold for at least the last two months;
OR,
- A letter of guarantee from the previous owner(s);
OR,
- Tested the milk from the animal(s) for antimicrobials using _____ test or I sent the sample(s) to _____ (plant/ laboratory), and have proof of a negative antimicrobial test result(s).

Signature of Seller: _____

Signature of Buyer / Recipient: _____