

Defiance County Fair

PARENT or LEGAL GUARDIAN AFFIDAVIT

DEFIANCE COUNTY AFFIDAVIT FOR NEVER FED RACTOPAMINE HYDROCHLORIDE (BETA AGONIST) TO SWINE

Fair or Exhibition Site: _____

Date of Exhibition Movement of Pigs to Harvest: _____

Total Number of Pigs at this Fair or Exhibition
under the responsibility of this Parent or Legal Guardian: _____

Never Fed Ractopamine Hydrochloride (beta agonist) to swine Producer Affidavit

I, _____, for the pigs pertaining to this affidavit, take responsibility for relevant practices applied in their raising from birth to harvest. I do affirm that the pigs covered by this affidavit have never been fed the beta-agonist ractopamine hydrochloride (Paylean®, Optaflexx®, Engain®, or any generic derivative) from birth harvest. The pigs listed below can be traced back to the location(s) where they were raised while under my control. Applicable documentation tracing movement of these animals from ownership at birth to sale date listed above will be made available within 24 hours upon written request.

PARENT or LEGAL GUARDIAN CONTACT INFORMATION:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

DESCRIPTION OF ANIMALS:

<u>Id at time of Sale</u>	<u>Pig Tattoo Number</u>	<u>Sex (Gilt/Barrow)</u>	<u>Breed or Color Description</u>	<u>PERSON RECEIVING AFFIDAVIT</u>

I certify that all statements are true to the best of my knowledge:

Parent Signature: _____ Date: _____

Warning: Persons willfully making false, fictitious, or fraudulent statements or entries are subject to fine or imprisonment or both as prescribed by Title 18 U.S. Code 1001

FORM MUST BE TURNED IN AT FAIR WEIGH-IN