

CERTIFICATE OF VETERINARY INSPECTION

82-252142

Name of Consignor TELUOSTONE BEAR WORLD		Name of Consignee NICHOLAS L. WIPTJE JR.		Entry Permit No. IPOOH416A	
Physical Address 4210 SOUTH 4300 WEST		Physical Address 12854 MER #505		Brand Inspection No.	Carrier Name and Address FREG WOODY 38-C-0218
City, State, Zip PEMBURG IDE344		City, State, Zip DIXON, MO 65459		Photo	Date

Species <input type="checkbox"/> Cattle <input type="checkbox"/> Horses <input type="checkbox"/> Sheep <input type="checkbox"/> Swine	Number of Animals Shipped 2	ORIGIN OF SHIPMENT		Area Status <input checked="" type="checkbox"/> TB Free <input type="checkbox"/> TB Mod. Accred. <input checked="" type="checkbox"/> Brucellosis Free <input type="checkbox"/> Brucellosis A	Brucellosis B <input type="checkbox"/> Brucellosis C <input type="checkbox"/> Other	Herd or Flock Status <input type="checkbox"/> Accredited Herd <input type="checkbox"/> Certified Herd <input type="checkbox"/> Validated Herd <input type="checkbox"/> Other	No. _____ No. _____ No. _____	QUAL. HERD TEST DATES	VACCINATION and/or TREATMENT
		County BLUEN HILLS	Market SEARS					1.	For
								2.	Date and Product
								3.	

INDIVIDUAL ANIMAL IDENTIFICATION AND TEST DATA				BRUCELLOSIS				OTHER TESTS		
OFFICIAL PERMANENT INDIVIDUAL IDENTIFICATION AND DESCRIPTION	AGE	BREED	SEX	TUBERCULIN TEST (INTRADERMAL)		Date		BRUC. VACC. TATTOO SYMBOL	Test For	Test For
				I N J	O B S	Date	Lab (Name and Address)		Lab	Lab
						Hour	Date		Accession No.	Accession No.
				TEST		TEST RESULTS		RESULTS	RESULTS	
				CARD	PLATE	RIV	CF			
1	2 FEMALE CUBS	200	F							
2	MICROCHIP #5 785 121011781 132									
3	785 121010241 187									
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VETERINARY CERTIFICATION I certify, as an accredited veterinarian, that the above-described animals have been inspected by me and that they are not showing signs of infectious, contagious, and/or communicable disease. (except where noted) The vaccinations and results of tests are as indicated on this certificate. To the best of my knowledge, the animals listed on this certificate meet the state of destination and federal interstate requirements. No further warranty is made or implied.		OWNER/AGENT STATEMENT (Where applicable) "The animals in this shipment are those certified to and listed on this certificate."		State Verification
Signature Paul M. Telu	Date 3/21/07	Date	Owner/Agent	
Print Name PAUL M. TELU	License # 11517			
Address 24062 E. PEMBURG IDE344	Phone 408 350 4271			

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