

CERTIFICATE OF VETERINARY INSPECTION

82-243823

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|--|--|---|--|---|--|
| Name of Consignor <i>Gregg Woody 1/2 Yellowstone Bear World</i> | | Name of Consignee <i>Gregg Woody</i> | | Entry Permit No. <i>USDA 33-C-0218</i> | |
| Physical Address <i>6106 S. 4300 W.</i> | | Physical Address <i>1909 Old Park Ave</i> | | Brand Inspection No. | Carrier Name and Address <i>Consignor</i> |
| City, State, Zip <i>Rexburg ID 83440</i> | | City, State, Zip <i>Millberry Grove ID</i> | | Date | |

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|---|---------------------------------------|--------------------------|--|--|---|---|
| Species <input type="checkbox"/> Cattle <input type="checkbox"/> Horses <input type="checkbox"/> Sheep <input type="checkbox"/> Swine | Number of Animals Shipped <i>2</i> | 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 | Herd or Flock Status <input type="checkbox"/> Accredited Herd No. _____ <input type="checkbox"/> Certified Herd No. _____ <input type="checkbox"/> Validated Herd No. _____ <input type="checkbox"/> Other _____ | QUAL. HERD TEST DATES 1. _____ 2. _____ 3. _____ | VACCINATION and/or TREATMENT For _____ Date and Product _____ |
| | | County <i>Madison</i> | | | | |

| INDIVIDUAL ANIMAL IDENTIFICATION AND TEST DATA | | | | TUBERCULIN TEST (INTRADERMAL) | | | | BRUCELLOSIS | | | | OTHER TESTS | |
|--|-------------|---------------|-----------------------|-------------------------------|----------|-----|------------------------|-------------|------|---------|---------------------------|---------------|---------------|
| I N J | O B S | AGE | B R E E D | SEX | Date | | Date | | | | BRUC. VACC. TATTOO SYMBOL | Test For | Test For |
| | | | | | Hour | | Lab (Name and Address) | | | | | Lab | Lab |
| | | | | | Hour | | TEST | | TEST | | | Accession No. | Accession No. |
| | | CARD | | PLATE | | RIV | | CF | | RESULTS | | RESULTS | |
| 1 | | <i>Tank 8</i> | | <i>low</i> | <i>F</i> | | | | | | | | |
| 2 | | <i>Tank 9</i> | | <i>low</i> | <i>F</i> | | | | | | | | |
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REC'D MAR 07 2016

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| VETERINARY CERTIFICATION <small>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 the 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.</small> | | OWNER/AGENT STATEMENT (Where applicable) "The animals in this shipment are those certified to and listed on this certificate." | | State Verification |
| Signature <i>Paul M. Tew</i> | Date <i>3-1-16</i> | Date <i>3-1-16</i> | Owner/Agent <i>Gregg Woody</i> | |
| Print Name <i>Paul M. Tew</i> | License # <i>V1317</i> | | | |
| Address <i>840 N 2nd E, #1, Rexburg, ID 83440</i> | Phone <i>(208) 356-4371</i> | | | |

ISDA018

CERTIFICATE OF VETERINARY INSPECTION

82-214176

| | | | | | | | |
|--|---------------------------------------|--|--|---|--|---|---|
| Name of Consignor <i>Yellowstone Bear World</i> | | Name of Consignee <i>Gregg Woody</i> | | Entry Permit No. <i>USDA 33-0-0218</i> | | | |
| Physical Address <i>6106 S. 4300 W.</i> | | Physical Address <i>1909 Old Park Ave</i> | | Brand Inspection No. | Carrier Name and Address <i>Consignor and Consignee</i> | | |
| City, State, Zip <i>Rexburg, ID 83440</i> | | City, State, Zip <i>Mulberry Grove, IL</i> | | | | | |
| Species | Number of Animals Shipped <i>3</i> | ORIGIN OF SHIPMENT County <i>Madison</i> Market | 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 No. _____ <input type="checkbox"/> Certified Herd No. _____ <input type="checkbox"/> Validated Herd No. _____ <input type="checkbox"/> Other | QUAL. HERD TEST DATES 1. _____ 2. _____ 3. _____ | VACCINATION and/or TREATMENT For _____ Date and Product _____ |

| INDIVIDUAL ANIMAL IDENTIFICATION AND TEST DATA | | | | BRUCELLOSIS | | | | OTHER TESTS | | |
|--|-------------|--------------|----------|-------------------------------|-----|------------------------|-------|---------------------------|----------|----------|
| OFFICIAL PERMANENT INDIVIDUAL IDENTIFICATION AND DESCRIPTION | AGE | BREED | SEX | TUBERCULIN TEST (INTRADERMAL) | | TEST | | BRUC. VACC. TATTOO SYMBOL | Test For | Test For |
| | | | | Date | | Lab (Name and Address) | | | Date | Date |
| | | | | INJ | OBS | CARD | PLATE | | RIV | CF |
| <i>#1</i> | <i>3 mo</i> | <i>Black</i> | <i>M</i> | | | | | | | |
| <i>#2</i> | <i>↓</i> | <i>Bear</i> | <i>F</i> | | | | | | | |
| <i>#3</i> | <i>↓</i> | <i>Cubs</i> | <i>F</i> | | | | | | | |
| <i>#4</i> | | | | | | | | | | |
| <i>#5</i> | | | | | | | | | | |
| <i>#15</i> | | | | | | | | | | |

REC'D APR 07 2016

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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 the 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 <i>Paul M. Tew DVM</i> | Date <i>3-28-16</i> | Date | Owner/Agent | |
| Print Name <i>Paul M. Tew DVM</i> | License # <i>V1317</i> | | | |
| Address <i>840 W 2nd E #2, Rexburg, ID 83440</i> | Phone <i>(208) 351-4271</i> | Address | | |

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