

Name and Address of Consignor <b>Yellowstone Bear World</b> 6110 South 4300 W. Rexburg ID 83440		Name and Address of Consignee <b>Greg Woody Mulberry Grove IL 62862</b>		Brand Inspection No.	PERMIT NO. <b>33-C-218</b> <b>E301</b>
Origin Address (If Different From Above)		Destination Address (If Different From Above)		Carrier Name and Address <b>Yellowstone Bear World</b>	

Species <input type="checkbox"/> Cattle <input type="checkbox"/> Horses <input type="checkbox"/> Sheep <input type="checkbox"/> Swine  <input type="checkbox"/> Poultry <input checked="" type="checkbox"/> Other <b>Bears</b>	Number of Animals Shipped <b>8</b>	ORIGIN OF SHIPMENT County <b>Madison</b> 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	<input type="checkbox"/> 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 _____
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INDIVIDUAL ANIMAL IDENTIFICATION AND TEST DATA				TUBERCULIN TEST (INTRADERMAL)		BRUCELLOSIS				OTHER TESTS		
OFFICIAL PERMANENT INDIVIDUAL IDENTIFICATION AND DESCRIPTION	AGE	BREED	SEX	Date		Lab (Name and Address)				BRUC. VACC. TATTOO SYMBOL	Test For	Test For
				I N J	Hour						Lab and Date	Lab and Date
				O B S	Hour	TEST		TEST RESULTS			RESULTS	RESULTS
				CARD	PLATE	RIV	CF					
1 #3	3m	BK Bear	F									
2 #4	3m		F									
3 #5	3m		M									
4 #14	3m		F									
5 #8	3m		F									
6 #10	3m		F									
7 #11	3m		M									
8 #13	3m		M									
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REC'D APR 5 2012

The veterinarian issuing this certificate is accredited and has been authorized to inspect animals and issue certificates.

<b>VETERINARY CERTIFICATION</b> <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>		<b>OWNER/AGENT STATEMENT (Where applicable)</b> "The animals in this shipment are those certified to and listed on this certificate."		State Verification <b>APR 05 2012</b>
Signature <b>Paul M. Tew</b>	Date <b>3-29-12</b>	Date	Owner/Agent	BUREAU OF ANIMAL HEALTH STATE OF IDAHO
Print Name <b>Paul Tew</b>	License #			
Address <b>810 N 2nd E #1 Rexburg Id 83440</b>	Phone <b>208 350 4271</b>	Address		