

3.3 Outgoing Veal Record

PRECONDITIONED CALVES

Total number of animals: _____

Animal identification number (tag number):

1. _____	6. _____
2. _____	7. _____
3. _____	8. _____
4. _____	9. _____
5. _____	10. _____

PRECONDITIONED CALVES

Possible broken needle:

NO YES

Animal ID: _____

Region: _____

Calf subject to withdrawal period:

NO YES

Animal ID: _____

Ending date of Withdrawal: _____

CALVES GOING TO SLAUGHTERHOUSE

11. _____	16. _____
12. _____	17. _____
13. _____	18. _____
14. _____	19. _____
15. _____	20. _____

CALVES GOING TO SLAUGHTERHOUSE

Possible broken needle:

NO YES

Animal ID: _____

Region: _____

Calf cleanliness respected:

NO YES

I certify that withdrawal times for medication and vaccine have been met: YES

Producer Signature: _____

Date Shipped: _____

Destination: _____

Trucker Signature: _____