MISSOURI DEPARTMENT OF AGRICULTURE
DIVISION OF ANIMAL HEALTH

BRUCELLOSIS HERD RECERTIFICATION - VERIFICATION

INSTRUCTIONS: For Brucellosis Certified Herd recertification, complete the following and return the WHITE copy to:

Missouri Department of Agriculture
Animal Health Division
P.O. Box 630
Jefferson City, MO 65102-0630
Telephone: (573) 751-4259

The herd owner should retain the PINK copy, and the testing veterinarian should retain the YELLOW copy.

In order to be eligible for recertification, all animals must conform to the following categories:

1. All animals were included on the preceding annual herd test and have remained on the premises; **OR**
2. Natural additions to the herd too young to test on the preceding certification test (identify as **NA** on test chart); **OR**
3. Test-eligible purchased additions (identified as **PA** on test charts) that:
   A. Originated from a Certified Brucellosis Free Herd or a Class Free State do not need to be tested before entering the herd. However, they must be tested within 60 to 120 days after being added in order to qualify for Certified Brucellosis Free status for sale purposes; **OR**
   B. Originated from a non-certified herd that has passed a negative blood test 30 days prior to entry into the herd and a second negative blood test 60 to 120 days after entry into the herd. These purchased additions to a certified herd do **not** obtain certified free status until they are included in the yearly (anniversary) test; **OR**
4. Re-tagged animals must be identified as **RT** on test charts. Note previous tag number if possible.

HERD OR PASTURE TESTED	DATE TESTED
TOTAL NUMBER OF ANIMALS TESTED	
TOTAL NUMBER OF NATURAL ADDITIONS	
TOTAL NUMBER OF PURCHASED ADDITIONS	
TOTAL RETESTED FROM PREVIOUS YEAR	

I, _____ (NAME OF OWNER OR MANAGER), certify that animals belonging to _____ (NAME OF HERD OWNER) appearing on the current herd test/completed on _____ (TEST DATE) are in compliance with all terms of the Individual Certified Herd Plan and the recertification requirements listed above.

OWNER/MANAGER SIGNATURE		DATE
SIGNATURE OF VETERINARIAN	VET AGREEMENT CODE	DATE

DISTRIBUTION: WHITE - MDA OFFICE **CANARY** - TESTING VETERINARIAN **PINK** - HERD OWNER