

## SAMPLE LETTER OF GUARANTEE / SHIPPING RECORD

Seller's Name (person or company): \_\_\_\_\_

Buyer / Recipient's Name (person or company): \_\_\_\_\_

Date Shipped: \_\_\_\_\_

Animal Identification Number(s): \_\_\_\_\_

Do any of the animals listed above have pending milk or meat withdrawal times or broken needles?    No                       Yes    If yes, please fill in the following table:

Animal ID	Date of Treatment	Product	Dose (✓)		Completed Withdrawal Date		Broken Needle? If Yes, describe site
			According to label	Extra label	Milk	Meat	

I, the seller, have:

- Owned the animal(s) being sold for at least the last two months; OR,
- A letter of guarantee from the previous owner(s); OR,
- Tested the milk from the animal(s) for antibiotics using \_\_\_\_\_ test or I sent the sample(s) to \_\_\_\_\_ (plant/ laboratory), and have proof of a negative antibiotic test result(s).

Test results for      Neospora \_\_\_\_\_

Leucosis \_\_\_\_\_

SCC \_\_\_\_\_

Signature of Seller: \_\_\_\_\_

Signature of Buyer / Recipient: \_\_\_\_\_