

## **BEEF**

### Iowa 4-H Animal Care and Management Disclosure Statement (Drug Affidavit)

#### Please print

County Pres		remise ID # (optional)						
Last	t Name Fi	rst Name						
As a the f	youth livestock producer, I understand that I have an food chain and become edible food products for the co	obligation to be a responsible producer and that all animals will enter nsuming public. This subjects every exhibit animal to all state and od & Drug Administration, Animal Plant Health Inspection Service,						
>	We, the undersigned, certify that we have <b>read</b> , <b>understand</b> and <b>will abide by</b> all rules and regulations of the local county 4-H & FFA fair, or the 4-H division of the Iowa State Fair. We agree to the condition that these exhibit animals (identified on this form) may be screened for violative residues and foreign substances. Also, as a condition of entry, exhibitor agrees to a background check for any past disqualification from other livestock shows.  We have completed the Treatment Records information on the back of this form for any injectable, water, or feed							
>	medication, pesticide or other substance that has been administered to exhibit animals. Use of these products may require additional time to meet legal withdrawal limits before harvest.  We certify that our exhibit animals have completed any withdrawal time relative to the administration of any legal drug, vaccine or other substance, and are in compliance with applicable FDA and USDA regulations (and similar state regulations) concerning drug residues and withdrawal periods.							
>	We certify that these exhibit animals have not received drugs that are not in compliance with label indications or, if applicable, the requirements of the regulations codifying the Animal Medicinal Drug Use Clarification Act amendment to the Federal Food, Drug, and Cosmetic act (under the direction of a valid Veterinary/Client/Patient relationship).							
	If violations are detected, appropriate state and federal authorities will be notified, and regulatory action can be expected.							
>	Also exhibitors will be subjected to penalties as determined by show management. We certify that, to the best of our knowledge, none of the livestock described herein are adulterated within the meaning of the Federal Food, Drug and Cosmetic Act (none of the cattle or sheep have been fed any feed containing protein derived from mammalian tissues, such as meat and bone meal from ruminants, not in compliance with 21 CFR 589.2000). We have purchase invoices and labeling for all feeds containing animal protein products. Copies of these records are to be made available to FDA upon request. See attached fact sheet for more information and at the website: http://www.extension.iastate.edu/4H/Agriculture/resources.htm							
>	COOL (Country of Origin Labeling) Compliance. By signing below, I/we hereby certify that all animals listed were born and raised in the United States; we have followed all COOL compliance guidelines, and have maintained the appropriate							
	Effective 7/2014: We further certify the listed animals	rds to provide as proof of country of origin.  **retive 7/2014: We further certify the listed animals have not received any form of zilpaterol hydrochloride (Zilmax,						
$\triangleright$	Showmaxx, or any other formulation and/or derivative We further certify the information provided is correct and may be relied upon by any person or entity accept	and accurate, and that we have read and understand these regulations						
Ow	vner's/Exhibitor's Signature	Parent or Guardian's Signature						
Date		Parent/Guardian, please indicate below your certification(s):						
		BQA (Beef Quality Assurance)						
		PQA Plus (Pork Quality Assurance)						
		FSQA (attended youth session)						
Mar	rket Beef ear tag number (s) <i>OR</i> Breeding Beef Tatt	too number(s)						

#### **Individual or Pen Animal Treatment Records**

Animal ID or Pen Location	Treatment Date	Product Name	Amount of Drug Given (cc, water or feed concentration)	Route (feed, water injectable by IM or SQ, topical)	Remarks/Initials or Who Administered	Withdrawal Time Needed Before Harvest	Date Withdrawal Completed

# IOWA STATE UNIVERSITY Extension and Outreach

... and justice for all

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Issued in furtherance of Cooperative Extension work, Acts of May 8 and June 30, 1914, in cooperation with the U.S. Department of Agriculture. Cathann A. Kress, director, Cooperative Extension Service, Iowa State University of Science and Technology, Ames, Iowa.