

Meat Goat

Iowa 4-H Animal Care and Management Disclosure Statement

Please print

County	Premise ID # (optional)
Last Name	First Name
will enter the food chain and becor state and federal regulations involve	estand that I have an obligation to be a responsible producer and that all market animals edible food products for the consuming public. This subjects every exhibit animal to all proper drug usage and all Food & Drug Administration, Animal Plant Health ction Service, and Environmental Protection Agency regulations.
county 4-H & FFA fair, or the (identified on this form) may be exhibitor agrees to a backgrouth where the treatment of the tr	Is have completed any withdrawal time relative to the administration of any legal drug,
regulations) concerning drug r We certify that these exhibit a applicable, the requirements o the Federal Food, Drug, and C	hals have not received drugs that are not in compliance with label indications or, if e regulations codifying the Animal Medicinal Drug Use Clarification Act amendment to netic act (under the direction of a valid Veterinary/Client/Patient relationship).
Also exhibitors will be subject **Effective 4/1/01 due to concern herein are adulterated within the goat have been fed any feed concuminants), not in compliance animal protein products. Copi for more information and web.	riate state and federal authorities will be notified, and regulatory action can be expected to penalties as determined by show management. of BSE. We certify that, to the best of our knowledge, none of the livestock described meaning of the Federal Food, Drug and Cosmetic Act (none of the cattle, sheep or meat uning protein derived from mammalian tissues, such as meat and bone meal from the 21 CFR 589.2000. We have purchase invoices and labeling for all feeds containing of these records are to be made available to FDA upon request. See attached fact sheet: http://www.extension.iastate.edu/4H/Agriculture/resources.htm of the Iowa Scrapie Eradication program by using official scrapie program ear tags on
all reproductively intact animal Effective 9/30/08: COOL (Cool all animals listed were born an	
➤ We further certify the informa	n provided is correct and accurate, and that we have read and understand these on by any person or entity accepting my (our) animal(s) for harvest.
Owner's/Exhibitor's Signature	Parent or Guardian's Signature
Date	
Meat Goat County ear tag number	

VI-050601-MC January 2015

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

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