

RECORD 11B: SAMPLE LETTER OF GUARANTEE / SHIPPING RECORD (FS27)

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, 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	
			<input type="checkbox"/>	<input type="checkbox"/>			
			<input type="checkbox"/>	<input type="checkbox"/>			
			<input type="checkbox"/>	<input type="checkbox"/>			
			<input type="checkbox"/>	<input type="checkbox"/>			

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 antimicrobials using _____ test or I sent the sample(s) to _____ (plant/ laboratory), and have proof of a negative antimicrobial test result(s).

Signature of Seller: _____

Signature of Buyer / Recipient: _____