## **CATTLE MOVEMENT DOCUMENT**

This form must be complete and accompany any cattle moving to Woolley Brothers for Scotbeef Ltd.

Time of Loading first animal on	farm:			000	2	e of Intake:
Time of Unloading last animal a	it abattoi	<u>.</u>	IMITED			ulier Name:
					ver	nicle Registration:
PRODUCER TRADING NAME & AD	Payee details if different from those on the left:			(P ar in	remises of Departure. Please affix BCMS sticker here) or if animals are not being moved from your holding write address and CPH number of holding of eparture.	
CONTACT NUMBER:					W Ro Sh	estination Premises: foolley Brothers Ltd other Valley Way, neffield.
FARM ASSURANCE NO:					Da	ate of Movement:
PLEASE SPECIFY 50/75/100	% AA AN	ID SUP	PLY THE CORR	ECT SIRI	ID FOR	ALL ABERDEEN ANGUS CATTLE.
OFFICIAL EAR TAG NUMBER.	BREED	SEX	FARM ASSURED FOR OVER 90 DAYS.	AA - % 50% 75% 100%		AA SIRE ID: EAR TAG NUMBER PREFERED.
A. W.						
<u>Declaration</u> : I declare that all information document is correct to the best of my kn	nowledge, an	d	PRINT NAME:			Detail what these animals have been fed on over the past 90 days.
each animal on this movement docume tagged according to current tagging reg each animal holds a valid passport corre	ulations and		IGNATURE:			
official ministry ear tag. All animal food	s of plant ori	gin 🕶				
and does not contain any Anti-Micrologi promoters. To my knowledge I declare are neither cloned or progeny of cloned	that these ca	1.00	DATE:			



FOO	D CHAIN	INFOR	MATION	FOR	CATTLE
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1	confirm	the	fol	lowing:
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- 1. The holding is / is not<sup>(\*)</sup> under movement restriction for bovine Tuberculosis (TB).

  (\*) delete one
- 2. The holding is not under movement restriction for any other animal disease or public health reason.
- 3. The cattle in this consignment have not originated or been held on a holding in the last 20 days which is within 50km of a confirmed case of Anthrax.
- 4. Withdrawal periods have been observed for all veterinary medicines or other treatments administrated to the animals while on this and previous holdings.
- 5. The animals are not suffering from any disease or condition, and any withdrawal period have been met for any previous illness.
- 6. No analysis of samples taken from animals on the holding or other samples has shown that the animals in this consignment may have been exposed to any disease or condition that may affect the safety of meat or to substances likely to result in residues in meat.

PRINT NAME  Date  If the animals do not fulfil all the above statements, tick this box and provide additional information below.  Keeper's signature  PRINT NAME	the safety of me	at or to substances likely to result in residues in meat.	
If the animals do not fulfil all the above statements, tick this box and provide additional information below.  Keeper's signature  PRINT NAME	Keeper's signature		
If the animals do not fulfil all the above statements, tick this box and provide additional information below.  Keeper's signature  PRINT NAME	PRINT NAME		11500 115
Keeper's signature  PRINT NAME	Date		
PRINT NAME	If the animals do not fulfi information below.	il all the above statements, tick this box and provide additional	
PRINT NAME			
	Keeper's signature		
Data	PRINT NAME		20.
Date	Date		