

United States Department of Agriculture Animal and Plant Health Inspection Service

KMAXWELL 2016090000595646 Insp_id

Inspection Report

SHADOWS LLC	Customer ID: 335188
18085 HWY 2	Certificate: 42-B-0297
BLOOMFIELD, IA 52537	Sito: 001

Site: 001

SHADOWS LLC

Type: ROUTINE INSPECTION

Date: 03-MAY-2021

No non-compliant items identified during this inspection.

This inspection and exit interview were conducted with the facility representative.

Additional Inspectors:

William Janecke, VETERINARY MEDICAL OFFICER

Prepared By: KELLY MAXWELL Date:

Title: ANIMAL CARE INSPECTOR

Received by Title: Facility Representative Date:

03-MAY-2021

03-MAY-2021

USDA, APHIS, Animal Care



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Species Inspected

Cust No	Cert No	Site	Site Name	Inspection
335188	42-B-0297	001	SHADOWS LLC	03-MAY-2021

CountScientific NameCommon Name000007Canis lupus familiarisDOG PUPPY

000007 **Total**