

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

0330

DATE
22 06 16

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Sonestown Pa

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Cavel Canada Export Inc

STREET ADDRESS

517 Range St Suite Est

CITY, STATE, ZIP CODE

St Andre Quebec

AREA CODE & TELEPHONE NO.

(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Sonestown Pa 17038

AREA CODE & TELEPHONE NO.

(b)(6)

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	155L0901	X											X		X		
2	0902	X											X	X			
3	0903				X				X				X				
4	0904				X				X						X		1 Eye
5	0905	X											X		X		
6	0906	X											X		X		
7	0907	X							X						X		
8	0908	X							X				X				
9	0909	X											X		X		
10	0910		X										X		X		
11	0911		X										X		X		
12	0912			X					X					X			
13	0913	X							X						X		
14	0914		X										X		X		
15	0915				X		X		X						X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIG

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. 505

DATE 2016/06/22

TIME 15h 25

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

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OMB NO.
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		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	15SL0916	X										X	X				
17	0917				X				X				X				
18	0918	X										X		X			
19	0919	X							X					X			
20	0920			X								X	X				
21	0921		X						X						X		
22	0922	X							X			X					
23	0923				X							X		X			
24	0924			X					X				X				
25	0925	X							X				X				
26	0926				X							X	X				
27	0927	X							X					X		IBV	
28	0928	X										X	X				
29	0929	X							X					X			
30	0930		X									X	X				
31																	
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U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
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FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

9:30 PM

DATE

June 28/2016

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

SonesTown Pa

(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

SonesTown Pa 17038

AREA CODE & TELEPHONE NO.

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Gavel Canada Export Frc

STREET ADDRESS

517 Range St. Suite 007

CITY, STATE, ZIP CODE

St. Andre-Aurel

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
1	VS1D 0001				X			X							X	
2	0002	X							X						X	
3	0003				X				X						X	
4	0004					X			X						X	1 EYE
5	0005				X				X						X	
6	0006	X							X						X	1 EYE
7	0007		X						X						X	
8	0008				X				X						X	
9	0009				X				X						X	
10	0010				X				X						X	
11	0011				X				X						X	
12	0012				X				X						X	
13	0013	X							X						X	
14	0014				X							X			X	
15	0015					X		X	X						X	

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGN

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SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

505

DATE

29/06/2016

TIME

11:50

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

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		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	USLD 0016				X				X			X				
17	0017			X								X X				
18	0018	X							X					X		
19	0019	X							X					X		
20	0020	X										X X				
21	0021			X								X		X		
22	0022			X								X		X		
23	0023			X			X							X		
24	0024	X										X		X		
25	0025		X									X X				
26	0026	X										X		X		
27	0027			X			X							X		
28	0028	X										X X				MP to Road
29	0029	X						X						X		
30	0030	X						X						X		
31																
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(I declare that the information contained in this form is true and correct to the best of my knowledge.)

**OWNER/SHIPPER CERTIFICATE
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FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE 10 PM	DATE July 7/2016	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Sonestown Pa
VEHICLE LICENCE NO. AND DRIVER'S NAME (b)(6)		NAME OF AUCTION/MARKET Cavel Gondola Export Inc
CONSIGNOR (OWNER/SHIPPER) NAME Brian Moore	STREET ADDRESS (b)(6)	STREET ADDRESS 517 Range St. Suite Est
CITY, STATE, ZIP CODE Sonestown Pa 17038	CITY, STATE, ZIP CODE (b)(6)	CITY, STATE, ZIP CODE St. Andre Avenue
		AREA CODE & TELEPHONE NO. 519 426 2111

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	135SL0031	X											X		X		
2	0032			X					X				X				
3	0033	X											X				
4	0034			X					X					X			
5	0035		X										X	X			
6	0036			X					X				X				
7	0037			X					X					X			
8	0038	X											X		X		
9	0039	X											X		X		
10	0040	X											X		X		
11	0041	X											X		X		
12	0042	X											X		X		
13	0043	X											X	X			
14	0044	X						X					X				
15	0045	X											X		X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

SIGNATURE
(b) (6)

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(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
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		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USSL 0046	X						X							X		
17	0047					X						X			X		IEKE
18	0048	X										X			X		
19	0049		X					X							X		
20	0050			X								X			X		
21	0051	X						X							X		
22	0052		X					X							X		
23	0053		X					X							X		
24	0054		X					X							X		
25	0055		X									X	X				
26	0056	X										X			X		
27	0057			X								X	X				
28	0058	X						X							X		
29	0059	X						X							X		
30	0060		X					X							X		
31																	
32																	
33																	
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35																	
36																	
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SIGNATURE OF OWNER/SHIPPER _____ the information contained in this form is true and correct to the best of my knowledge.)
(b) (6)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
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OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

DATE

10 PM

July 7/2016

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Somestown Pa

VEHICLE LICENSE NO. AND DRIVER'S NAME
(b)(6)

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CONSIGNEE (RECEIVER/DESTINATION) NAME

Gavel Canada Export Inc

STREET ADDRESS

517 Range St. Suite Est

CITY, STATE, ZIP CODE

Somestown Pa 17038

CITY, STATE, ZIP CODE

St. Andre Auction

AREA CODE & TELEPHONE NO.

(b)(6)

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.
 Foals are older than 6 months of age.

Horses are able to bear weight on all 4 limbs.
 Horses are not blind in both eyes.

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		Bay	Grey	Bk.	Pinto	Chestn	Other	TB	OT	Draft	Pony	Other	Mare	Stal	Geld		
1	125L0031	X										X			X		
2	0032				X				X				X				
3	0033	X										X			X		
4	0034				X				X						X		
5	0035		X									X	X				
6	0036				X				X				X				
7	0037				X				X						X		
8	0038	X										X			X		
9	0039	X										X			X		
10	0040	X										X			X		
11	0041	X										X			X		
12	0042	X										X			X		
13	0043	X										X	X				
14	0044	X						X				X					
15	0045	X										X			X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

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SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**

(Please type or print in Ink)

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		Bay	Gray	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	US-SC 0046	X							X							X	
17	0047					X						X				X	
18	0048	X										X				X	1EKE
19	0049		X					X				X				X	
20	0050			X								X				X	
21	0051	X						X				X				X	
22	0052			X				X				X				X	
23	0053			X				X				X					
24	0054			X				X								X	
25	0055		X									X	X				
26	0056	X										X	X			X	
27	0057			X								X	X				
28	0058	X						X				X	X				
29	0059	X						X				X					
30	0060			X				X					X			X	
31																	
32																	
33																	
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(b) (6)

The information contained in this form is true and correct to the best of my knowledge.)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 7, 2016

Certificate Number
VS-PA-16-CA-006-00017554

Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
 - The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian DONALD YORLETS	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date July 7, 2016	Date July 7, 2016

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 7, 2016

Certificate Number
VS-PA-16-CA-006-00017554

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
24	0054	Chestnut	Quarter Horse	9 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
25	0055	Piebald	Paint	14 Years	Female		STAR STRIPE SNIP	None	KNEE	ALL	fetlock	HOCK	
26	0056	Bay	Standardbred	15 Years	Neutered Male		STAR STRIPE SNIP	None	CORONET	None	None	PASTERN	
27	0057	Sorrel	Saddlebred	12 Years	Female		STAR SNIP	None	None	None	fetlock	FETLOCK	
28	0058	Bay	Quarter Horse	10 Years	Female		BLAZE	None	PASTERN	PASTERN	PASTERN	PASTERN	
29	0059	Bay	Quarter Horse	5 Years	Neutered Male		STAR	None	None	None	PASTERN	PASTERN	
30	0060	DARK CHESTNUT	Quarter Horse	7 Years	Male		Star stripe	None	None	None	None	None	

OPA

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**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 7, 2016

Certificate Number
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21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0031	Bay	Standardbred	16 Years	Neutered Male		FEW HAIRS	None	None	None	None	CORONET	
2	0032	Chestnut	Quarter Horse	14 Years	Female		STAR	None	None	None	None	None	
3	0033	Bay	Quarter Horse	12 Years	Female		BLAZE	None	CORONET	CORONET	fetlock	FETLOCK	
4	0034	Sorrel	Quarter Horse	18 Years	Neutered Male		STAR	None	None	None	PASTERN	None	
5	0035	Skewbald	Paint	20 Years	Female		BLAZE	None	ALL	ALL	ALL	ALL	
6	0036	Palomino	Quarter Horse	14 Years	Female		STAR	None	None	None	None	None	
7	0037	DARK CHESTNUT	Quarter Horse	15 Years	Neutered Male		STAR	None	None	None	PASTERN	None	
8	0038	Bay	Standardbred	12 Years	Neutered Male		None	None	None	None	CORONET	CORONET	
9	0039	Bay	Standardbred	14 Years	Neutered Male		None	None	None	None	CORONET	None	
10	0040	Bay	Standardbred	10 Years	Neutered Male		STAR	None	None	None	PASTERN	PASTERN	
11	0041	Bay	Standardbred	13 Years	Neutered Male		None	None	None	None	None	None	
12	0042	BAY-BROWN	Standardbred	9 Years	Neutered Male		STAR FEW HAIRS	None	None	None	None	None	
13	0043	Bay	Standardbred	8 Years	Female		STAR	None	None	None	PASTERN	None	
14	0044	Bay	Quarter Horse	4 Years	Female		STAR	None	CORONET	None	None	None	
15	0045	Bay	Standardbred	8 Years	Neutered Male		None	None	None	None	CORONET	None	
16	0046	Bay	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	CORONET	
17	0047	Chestnut	Standardbred	23 Years	Neutered Male		STAR STRIPE SNIP	None	None	PASTERN	PASTERN	None	ONE EYE
18	0048	DARK BAY	Standardbred	16 Years	Neutered Male		STAR	None	None	None	None	None	
19	0049	Black	Quarter Horse	9 Years	Neutered Male		STAR SNIP	None	None	None	None	None	
20	0050	LIGHT CHESTNUT	Saddlebred	12 Years	Neutered Male		STAR STRIPE	None	None	None	CORONET	CORONET	
21	0051	Bay	Quarter Horse	10 Years	Neutered Male		STAR FEW HAIRS	None	None	None	PASTERN	None	
22	0052	Sorrel	Quarter Horse	14 Years	Female		BLAZE	None	None	None	fetlock	None	
23	0053	Chestnut	Quarter Horse	18 Years	Neutered Male		STAR	None	None	None	None	CORONET	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue July 7, 2016	Certificate Number VS-PA-16-CA-006-00017554		
<table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;">1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525</td> <td style="width: 50%; padding: 5px;">2. Consignee: CAVEL CANADA EXPORT INC 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada</td> </tr> </table>			1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: CAVEL CANADA EXPORT INC 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
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<table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;">5. Country Of Destination: Canada</td> <td style="width: 50%; padding: 5px;">6. Zone Of Destination: *****</td> </tr> </table>			5. Country Of Destination: Canada	6. Zone Of Destination: *****
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<table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;">7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038</td> <td style="width: 50%; padding: 5px;">8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port</td> </tr> </table>			7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
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<p>21. Identification Of Commodities: (See next page)</p> <p>***** ***** *****</p>				

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

DATE

10 PM

July 14/2016

VEHICLE LICENSE NO. AND DRIVER'S NAME
(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Sonestown PA 17038

AREA CODE & TELEPHONE NO.

(b)(6)

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Sonestown

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Calvel Canada Export Inc

STREET ADDRESS

517 Range St. Julie Est

CITY, STATE, ZIP CODE

St Andre - Avellin

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS include existing conditions	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0061			X								X	X				
2	0062				X				X				X				
3	0063	X								X						X	
4	0064			X					X							X	
5	0065	X									X					X	
6	0066	X									X	X					
7	0067	X									X					X	
8	0068			X					X							X	
9	0069				X				X							X	
10	0070					X		X					X				
11	0071				X					X						X	
12	0072		X							X			X				
13	0073	X									X					X	
14	0074	X									X	X					
15	0075				X				X				X				

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIG:

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

505

DATE

15/07/2016

TIME

12:50

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USLD 0076	X									X					X	
17	0077	X									X					X	
18	0078			X				X				X					
19	0079	X									X					X	
20	0080	X									X	X					
21	0081			X				X				X					
22	0082			X				X							X		
23	0083			X							X	X					
24	0084	X									X					X	
25	0085	X						X				X					
26	0086		X					X				X					
27	0087			X							X	X					
28	0088		X								X				X		Not on load
29	0089			X							X				X		
30	0090	X									X				X		
31																	
32																	
33																	
34																	
35																	
36																	
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SIGNA(b) (6)

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**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
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FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

10 PM

DATE

July 14/2016

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

SonesTown

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Avril Canada Export Inc

STREET ADDRESS

517 Range St. Julie Est

CITY, STATE, ZIP CODE

St Andre - Avril

AREA CODE & TELEPHONE NO.

(b)(6)

(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

SonesTown PA 17038

AREA CODE & TELEPHONE NO.

(b)(6)

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0061			X								X	X				
2	0062				X				X				X				
3	0063	X								X				X			
4	0064			X					X					X			
5	0065	X									X			X			
6	0066	X									X	X					
7	0067	X									X			X			
8	0068			X					X					X			
9	0069				X				X					X			
10	0070					X			X				X				
11	0071			X						X				X			
12	0072		X							X			X				
13	0073	X									X			X			
14	0074	X									X	X					
15	0075			X					X				X				

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SK

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SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

505

DATE

15/07/2016

TIME

12:55:50

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

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FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USLD 0076	X										X			X		
17	1 0077	X										X			X		
18	0078			X				X				X	X				
19	0079	X										X			X		
20	0080	X										X	X				
21	0081			X				X				X					
22	0082			X				X						X			
23	0083			X								X	X				
24	0084	X										X			X		
25	0085	X						X				X					
26	0086		X					X				X					
27	0087		X									X	X				
28	0088		X									X			X		Not on load
29	0089			X				X							X		
30	1 0090	X							X						X		
31																	
32																	
33																	
34																	
35																	
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SIGNAT(b) (6)

The information contained in this form is true and correct to the best of my knowledge.)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue July 14, 2016	Certificate Number VS-PA-16-CA-006-00017770
--	---------------------------------------	---

1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525		2. Consignee: CAVEL CANADA EXPORT INC 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada	
3. Country Of Origin: USA		4. State Of Origin: Pennsylvania	
5. Country Of Destination: Canada		6. Zone Of Destination: *****	
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038		8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port	
9. Estimated Date Of Shipment: July 14, 2016		10. Means Of Transport: Truck	
11. *****		12. CITES Permit Number: *****	
13. Description Of Commodity: Horses		14. Date Of Inspection: *****	
15. Total Quantity: 30		16. Additional Information: *****	
17. Total Number Of Packages/Containers: 1 Truck			
18. Identification / Seal Numbers: *****			
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Admission: Permanent Import	
21. Identification Of Commodities: (See next page)			
***** ***** *****			

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 14, 2016

Certificate Number
VS-PA-16-CA-006-00017770

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0061	Piebald	Paint	16 Years	Female		BLAZE	None	KNEE	PASTERN	PASTERN	None	
2	0062	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	None	None	None	
3	0063	Bay	Quarter Horse	18 Years	Neutered Male		None	None	None	None	None	None	
4	0064	Sorrel	Quarter Horse	9 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
5	0065	Bay	Standardbred	19 Years	Neutered Male		FEW HAIRS	None	None	None	None	None	
6	0066	Bay	Standardbred	21 Years	Female		STAR	None	None	None	None	None	
7	0067	Bay	Standardbred	15 Years	Neutered Male		STAR	None	PASTERN	PASTERN	None	None	
8	0068	Sorrel	Quarter Horse	8 Years	Neutered Male		None	None	None	None	None	None	
9	0069	Sorrel	Quarter Horse	12 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
10	0070	Roan	Quarter Horse	14 Years	Female		STAR STRIPE SNIP	None	None	FETLOCK	fetlock	FETLOCK	
11	0071	Sorrel	Tennessee Walking Horse	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
12	0072	Black	Quarter Horse	9 Years	Female		None	None	None	None	None	None	
13	0073	Bay	Standardbred	15 Years	Neutered Male		None	None	None	None	None	None	
14	0074	Bay	Standardbred	16 Years	Female		None	None	None	None	None	None	
15	0075	Sorrel	Quarter Horse	10 Years	Female		STAR SNIP	None	None	None	None	PASTERN	
16	0076	Bay	Standardbred	9 Years	Neutered Male		None	None	PASTERN	PASTERN	None	FETLOCK	
17	0077	Bay	Standardbred	14 Years	Neutered Male		STAR STRIPE SNIP	None	None	PASTERN	fetlock	FETLOCK	
18	0078	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	FETLOCK	FETLOCK	ANTERIOR	FETLOCK	
19	0079	Bay	Standardbred	16 Years	Neutered Male		None	None	None	None	None	None	
20	0080	Bay	Standardbred	12 Years	Female		STAR	None	None	None	None	FETLOCK	
21	0081	Sorrel	Quarter Horse	9 Years	Female		STAR STRIPE	None	None	None	None	None	
22	0082	Sorrel	Quarter Horse	18 Years	Neutered Male		BLAZE	None	PASTERN	CORONET	CORONET	CORONET	
23	0083	Skewbald	Paint	10 Years	Female		BLAZE	None	None	None	None	None	
24	0084	Bay	Standardbred	16 Years	Neutered Male		None	None	PASTERN	PASTERN	PASTERN	ANTERIOR	
25	0085	Bay	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
26	0086	Black	Quarter Horse	9 Years	Female		STAR STRIPE	None	A L	None	None	PASTERN	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 14, 2016

Certificate Number
VS-PA-16-CA-006-00017770

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
27	0087	Piebald	Paint	15 Years	Female		BLAZE	None	LEG	LEG	LEG	LEG	
28	0088	Skewbald	Paint	28 Years	Neutered Male		BLAZE	None	KNEE	KNEE	HIND QTR	HIND QTR	
29	0089	Sorrel	Tennessee Walking Horse	21 Years	Neutered Male		BLAZE	None	PASTERN	PASTERN	fetlock	FETLOCK	
30	0090	Grey	Tennessee Walking Horse	23 Years	Neutered Male		None	None	None	None	None	None	

COPY

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue July 14, 2016	Certificate Number VS-PA-16-CA-006-00017770
--	---------------------------------------	---

Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian DONALD YORLETS	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date July 14, 2016	Date July 14, 2016

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

9 PM

DATE

Aug 30/2016

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Sonestown Pa

VEHICLE LICENSE NO. AND DRIVER'S NAME
(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

Brign Moore

STREET ADDRESS
(b)(6)

CITY, STATE, ZIP CODE

Sonestown Pa 17038

AREA CODE & TELEPHONE NO.

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

517 Range St, Julie Est

CITY, STATE, ZIP CODE

St. Andre-Avellin

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
1	USLD 0091	X										X	X			
2	0092					X		X							X	
3	0093				X							X	X			
4	0094	X						X				X	X			
5	0095			X								X		X		
6	0096				X	X		X						X		
7	0097		X									X	X			
8	0098				X			X						X		
9	0099	X						X						X		
10	0100	X						X						X		
11	0101				X			X						X		
12	0102					X		X						X		
13	0103	X										X	X			
14	0104	X										X	X			
15	0105		X									X	X			

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGN

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER/I certify that the information contained in this form is true and correct to the (b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

SOP

DATE

31-09-2016

TIME

12h48

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	VSLD0106				X			X				X				
17	0107	X							X			X				1 Eye
18	0108					X		X				X				
19	0109				X			X				X				
20	0110	X						X								
21	0111				X			X				X				
22	0112		X							X		X				
23	0113				X			X								
24	0114		X					X				X				
25	0115	X						X				X				
26	0116			X				X				X				
27	0117		X							X		X				1 Eye
28	0118			X				X								
29	0119	X								X		X				
30	0120			X				X				X				
31																
32																
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SIGN: (b) (6)

Information contained in this form is true and correct to the best of my knowledge.)

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

9PM

DATE

Sept 6 2016

(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Sonestown Pa 17038

AREA CODE & TELEPHONE NO.

(b)(6)

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Sonestown Pa

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

517 Range St Salle Est

CITY, STATE, ZIP CODE

St Andre - Auillin

AREA CODE & TELEPHONE NO.

(b)(6)

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	VSLD 0121	X						X					X				
2	0122	X							X							X	
3	0123	X											X	X			
4	0124				X			X					X				
5	0125	X											X		X		
6	0126			X									X		X		
7	0127			X									X		X		
8	0128			X									X		X		
9	0129			X				X					X				
10	0130	X						X							X		
11	0131				X			X							X		
12	0132	X							X						X		
13	0133		X						X						X		
14	0134			X					X						X		
15	0135			X					X						X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGN

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SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

505

DATE

07/09/2016

TIME

12:00

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	VSLD 0136			X							X				X	
17	J 0137				X				X			X				
18	0138				X				X						X	
19	0139 X							X				X				
20	0140 X							X				X			X	
21	0141				X						X				X	
22	0142				X			X							X	
23	0143				X			X				X				
24	0144				X						X				X	
25	0145				X						X				X	
26	0146 X							X				X				
27	0147			X							X	X				
28	0148			X							X	X				
29	J 0149			X							X	X				
30	J 0150				X			X				X			X	
31																
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SIGNATURE (b) (6)

Contained in this form is true and correct to the best of my knowledge.)

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

1030 PM

DATE

Sept/3/16

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Benezetown Pa

VEHICLE LICENSE NO. AND DRIVER'S NAME
(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Benezetown Pa 17638

AREA CODE & TELEPHONE NO.

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

517 Range St Julie Est

CITY, STATE, ZIP CODE

5t Andre -Avellin

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	VSL0051				X				X				X				
2	0152						X		X					X			
3	0153					X			X				X				
4	0154	X							X				X				
5	0155		X										X		X		
6	0156	X							X				X				
7	0157		X						X				X				
8	0158	X							X				X				
9	0159	X							X					X			
10	0160	X							X					X			
11	0161		X										X	X			
12	0162	X							X						X		
13	0163			X					X				X				
14	0164			X					X				X				
15	0165			X					X						X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGN.

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)
(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

EST.

DATE

TIME

505
14/09/2016

15h20

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	VSID0166		X						X				X				
17	0167					X			X				X				
18	0168	X										X		X			
19	0169	X										X		X			
20	0170	X										X		X		NOT ON 10006	
21	0171	X										X		X			
22	0172			X					X					X			
23	0173	X										X		X			
24	0174	X										X		X			
25	0175	X										X		X			
26	0176	X										X		X			
27	0177		X									X	X				
28	0178		X									X		X			
29	0179	X										X	X				
30	0180		X									X		X			
31																	
32																	
33																	
34																	
35																	
36																	
37																	
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(b) (6) (Signature of Owner/Shipper) _____ (Indicate that the information contained in this form is true and correct to the best of my knowledge.)

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

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FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

9pm

DATE

Sept 20/2016

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Sonestown Pa

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

517 Range St. Julie EST

CITY, STATE, ZIP CODE

St. Andre - Avellin

AREA CODE & TELEPHONE NO.

VEHICLE LICENSE NO. AND DRIVER'S NAME

(b)(6)

CONSIGNEE (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Sonestown Pa 17038

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0181	X						X					X				
2	0182	X						X					X				
3	0183	X						X					X				
4	0184				X			X					X				
5	0185		X					X					X				1 Eye
6	0186		X							X	X						
7	0187	X						X					X				
8	0188		X							X	X						
9	0189	X						X					X				
10	0190	X						X							X		
11	0191			X						X	X						
12	0192	X						X							X		
13	0193		X							X	X						
14	0194	X						X					X				
15	0195	X						X					X				

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGNATURE

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SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

508

DATE

11/09/2016

TIME

11:40

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	05LD 0196	X							X				X				
17	0197				X				X				X				
18	0198					X			X						X		
19	0199	X										X			X		
20	0200				X				X						X		
21	0201	X								X			X				
22	0202				X							X			X		
23	0203		X							X					X		
24	0204	X										X			X		1 Eye
25	0205	X							X						X		
26	0206				X				X						X		
27	0207	X							X						X		
28	0208				X				X				X				
29	0209					X			X						X		
30	0210				X				X						X		
31																	
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SIGNATURE OF OWNER/SHIPPER (Redacted) (b) (6) (Information contained in this form is true and correct to the best of my knowledge.)

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

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FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

9 PM

DATE

Sept 27/2016

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Senestown Pa

VEHICLE LICENSE NO. AND DRIVER'S NAME
(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Senestown Pa 17038

AREA CODE & TELEPHONE NO.

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

517 Range St, Solice est

CITY, STATE, ZIP CODE

St Andre - Avellin

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip.
 Foals are older than 6 months of age.

- Horses are able to bear weight on all 4 limbs.
 Horses are not blind in both eyes.

- Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	VSL 0211			X									X		X		
2	0212	X											X		X		
3	0213		X										X	X			
4	0214			X				X					X				
5	0215			X				X							X		
6	0216	X						X							X		
7	0217			X				X							X		
8	0218			X				X					X			1 Eye	
9	0219			X				X					X				
10	0220			X				X					X				
11	0221			X				X					X				
12	0222			X				X					X				
13	0223	X						X					X				
14	0224			X				X							X		
15	0225			X				X						X			

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b)(6)

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER/I certify that the information contained in this form is true and correct to the (b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

505

DATE

28/09/2016

TIME

11h45

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	VSLD0226				X				X			X				
17) 0227					X			X						X	
18	0228					X			X			X				
19	0229				X				X						X	
20	0230	X							X			X				
21	0231	X							X						X	
22	0232		X						X			X				
23	0233	X							X			X				
24	0234	X							X						X	
25	0235	X							X						X	
26	0236		X									X			X	
27	0237	X										X	X			
28	0238			X				X							X	
29) 0239	X										X			X	
30) 0240	X										X			X	
31																
32																
33																
34																
35																
36																
37																
38																
39																
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SIGNATURE (b) (6)

(The information contained in this form is true and correct to the best of my knowledge.)

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

FORM
APPROVED
OMB NO.
0579-0160

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TIME HORSES LOADED ON CONVEYANCE <i>9 PM</i>	DATE <i>Oct 4/2016</i>	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
VEHICLE LICENSE NO. AND DRIVER'S NAME (b)(6)		NAME OF AUCTION/MARKET
CONSIGNOR (OWNER/SHIPPER) NAME <i>Brian Moore</i> STREET ADDRESS (b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME <i>Les Viandes de la Petite Nation</i> STREET ADDRESS <i>577 Range St Suite Est</i> CITY, STATE, ZIP CODE <i>St. Andre - Avellan</i> AREA CODE & TELEPHONE NO. (b)(6)
		AREA CODE & TELEPHONE NO. <i>514 343-1234</i>

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	VSLD0241				X			X					X				
2	0242	X											X			X	
3	0243	X						X								X	
4	0244				X		X									X	
5	0245	X											X			X	
6	0246	X											X			X	
7	0247	X						X					X				
8	0248		X					X								X	
9	0249	X						X					X				
10	0250			X				X					X				
11	0251	X						X								X	
12	0252	X						X					X				
13	0253			X									X			X	
14	0254				X								X			X	
15	0255				X			X								X	

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.
(b) (6)

SIG

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to
(b) (6))

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. *SOS*
DATE *2016/10/05*
TIME *11h30*

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. *SOS*
DATE *2016/10/05*
TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	1560 0256	X							X							X	
17	1 0257		X						X				X				
18	0258			X								X	X				
19	0259			X								X		X			
20	0260				X							X		X			
21	0261				X							X	X				
22	0262		X				X					X					
23	0263	X										X		X			
24	0264	X										X		X			
25	0265	X										X		X			
26	0266	X										X		X			
27	0267	X										X		X			
28	0268		X									X	X				
29	0269	X										X		X			
30	0270	X					X					X					
31																	
32																	
33																	
34																	
35																	
36																	
37																	
38																	
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SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

FORM
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TIME HORSES LOADED ON CONVEYANCE

10, PM

DATE

Oct 18/2016

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Jonestown Pa

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

517 Rang St Julie EST

CITY, STATE, ZIP CODE

St Andre-Avellin

AREA CODE & TELEPHONE NO.

(b)(6)

VEHICLE LICENSE NO. AND DRIVER'S NAME

(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Jonestown Pa 17038

AREA CODE & TELEPHONE NO.

(b)(6)

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	VSL0 0271		X					X				X					
2			X						X							X	
3		0273	X						X							X	
4		0274	X						X			X					
5		0275			X							X	X				
6		0276	X									X			X		
7		0277			X							X			X		
8		0278			X							X			X		
9		0279			X							X	X				
10		0280			X							X	X				1 EYE
11		0281			X			X							X		
12		0282		X								X	X				
13		0283		X								X	X				
14		0284			X				X				X				
15		0285			X							X	X				

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

S

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SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

505

DATE

19/10/2016

TIME

12 h 45

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

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FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	VSLD 0286					X					X				X		
17	0287				X			X				X					
18	0288					X		X					X				
19	0289					X					X		X			TEYE	
20	0290	X									X			X			
21	0291	X						X				X		X			
22	0292		X									X		X			
23	0293	X										X	X				
24	0294			X			X					X		X			
25	0295			X								X		X			
26	0296	X										X		X			
27	0297	X										X	X	X			
28	0298			X				X						X			
29	0299	X										X		X			
30	0300	X										X	X				
31																	
32																	
33																	
34																	
35																	
36																	
37																	
38																	
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SIGN (b) (6)

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**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

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FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

3 AM

DATE

Nov 12016

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Encampment PA

(b)(6)

CONSIGNEE (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Jonestown PA 17038

AREA CODE & TELEPHONE NO.

(b)(6)

NAME OF AUCTION/MARKET

Les Mandes Orla Petite Nation

STREET ADDRESS

517 Range St. Julie EST

CITY, STATE, ZIP CODE

St Andrea - Avellin

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0301	X						X								X	
2	0302			X				X								X	
3	0303			X				X								X	
4	0304	X						X					X				
5	0305		X									X	X				
6	0306		X									X	X				
7	0307		X					X							X		
8	0308	X						X				X	X				
9	0309		X									X			X		
10	0310		X					X					X				
11	0311		X					X					X				
12	0312		X						X						X		
13	0313		X									X			X		
14	0314		X					X							X		
15	0315		X									X			X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGNATURE

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SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

505

DATE

11/11/2016

TIME

1600

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USLO 0316	X						X				X					
17	0317				X				X						X		
18	0318			X				X				X					Not On load
19	0319	X						X							X		
20	0320			X				X							X		
21	0321	X						X							X		
22	0322	X										X			X		
23	0323	X						X							X		
24	0324	X										X			X		
25	0325	X						X				X					
26	0326	X						X							X		
27	0327	X						X				X			X		
28	0328	X										X	X				
29	0329		X					X				X	X				1 Eye
30	0330		X					X				X	X				
31																	
32																	
33																	
34																	
35																	
36																	
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**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
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FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

8 PM

DATE

Nov 21/2016

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Sonestown PA

VEHICLE LICENSE NO. AND DRIVER'S NAME

(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Sonestown Pa 17038

AREA CODE & TELEPHONE NO.

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

517 Range St Jolie Est

CITY, STATE, ZIP CODE

St Andre - Auillin

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	U2D 0331			X								X			X		
2	0332 X								X				X				
3	0333 X								X						X		
4	0334 X	X							X			X					
5	0335 X											X			X		
6	0336 X											X			X		
7	0337 X											X			X		
8	0338		X					X					X				
9	0339			X					X						X		
10	0340 X											X			X		
11	0341 X							X					X				
12	0342 X								X				X				
13	0343			X					X						X		
14	0344 X											X			X		
15	0345 X							X							X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGN

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SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. 2016-11-03 ML

DATE # 505

TIME 12:00

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	VS1D 0346	X									X					X	
17	0347		X						X							X	
18	0348			X					X							X	
19	0349	X							X							X	
20	0350	X										X				X	
21	0351			X							X	X					
22	0352	X							X							X	
23	0353	X									X					X	
24	0354			X					X			X					
25	0355	X							X							X	
26	0356	X									X	X				X	
27	0357			X					X							X	
28	0358	X									X	X				X	
29	0359	X							X			X				X	
30	0360			X					X			X				X	
31																	
32																	
33																	
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I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGN (b) (6)

The information contained in this form is true and correct to the best of my knowledge.)

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

8 P.M.

DATE

Jan 3/2017

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

VEHICLE LICENSE NO. AND DRIVER'S NAME
(b)(6) [REDACTED]

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Vitrines de la Petite Nation

STREET ADDRESS

517 Rang St Solic Est

CITY, STATE, ZIP CODE

Sonestown PA 17038

CITY, STATE, ZIP CODE

St Andre - Avellin

AREA CODE & TELEPHONE NO.
(b)(6) [REDACTED]

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Bk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0391	X						X								X	
2	0392		X					X					X				
3	0393		X					X								X	
4	0394	X						X								X	
5	0395				X	X							X				
6	0396	X						X					X				
7	0397				X			X					X				
8	0398				X			X					X				
9	0399				X			X								X	
10	0400	X											X	X			
11	0401	X											X			X	
12	0402	X											X			X	
13	0403	X											X			X	
14	0404				X								X	X			
15	0405	X											X			X	

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGNATURE

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

505

DATE

4/01/2017

TIME

12h42

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	CIT	Draft	Pony	Other	Mare	Stal	Geld	
16	UKSD 0406	X									X				X	
17	0407				X					X					X	
18	0408			X							X	X				4
19	0409				X						X	X				
20	0410	X						X				X				
21	0411			X							X				X	
22	0412			X							X				X	
23	0413	X									X				X	
24	0414			X				X							X	
25	0415	X						X							X	
26	0416			X				X							X	
27	0417				X	X					X					
28	0418	X									X				X	
29	0419	X									X				X	
30	0420	X									X				X	
31																
32																
33																
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SIG(b) (6)

(That the information contained in this form is true and correct to the best of my knowledge.)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

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FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE DATE CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

9 PM

Jan 19/2017

Sonestown Pa

VEHICLE LICENCE NO. AND DRIVER'S NAME

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Sonestown Pa 17038

AREA CODE & TELEPHONE NO.

(b)(6)

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la petite Nation

STREET ADDRESS

517 Rang St Julie est

CITY, STATE, ZIP CODE

St. Andre - Avellin

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0421	X										X			X		
2	0422	X								X				X			
3	0423	X								X				X			
4	0424	X								X				X			
5	0425				X					X				X			
6	0426	X									X			X			
7	0427				X					X				X			
8	0428	X								X				X			
9	0429		X							X				X			
10	0430			X						X				X			
11	0431	X									X			X			
12	0432				X					X				X			NOT ON
13	0433				X					X				X			1000
14	0434	X								X				X			
15	0435				X						X			X			

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGN

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. 5-05

DATE 7-17-11-20

TIME 124 40

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1986, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing Instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	15LD 0436			X								X			X	
17	0437	X							X						X	
18	0438		X									X		X		NOT ON 1000
19	0439	X							X						X	
20	0440	X							X				X			
21	0441				X				X				X			
22	0442	X							X						X	
23	0443	X							X						X	
24	0444		X									X	X			
25	0445	X										X			X	
26	0446	X							X				X			
27	0447			X					X				X			
28	0448	X							X				X			
29	0449		X						X				X			
30	0450				X							X	X			
31																
32																
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SIGNATURE OR NAME _____

the information contained in this form is true and correct to the best of my knowledge.)

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(Please type or print in ink)

 FORM APPROVED
 OMB NO.
 0579-0160

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <i>Sonestown Pa</i>
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET <i> </i>
CONSIGNOR (OWNER/SHIPPER) NAME <i>Brian Moore</i> (b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME <i>Les Viandes de la petite Nation</i>
CITY, STATE, ZIP CODE <i>Sonestown Pa 17038</i> (b)(6)		STREET ADDRESS <i>517 Range St, Julie est</i>
		CITY, STATE, ZIP CODE <i>St. Andre-Avallon</i>
		AREA CODE & TELEPHONE NO. <i> </i>

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
- Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Bk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	VSLD 0451				X		X							X			
2	0452	X											X	X			
3	0453	X											X		X		
4	0454	X											X		X		
5	0455		X					X					X				
6	0456			X						X	X						
7	0457			X						X	X					1 Eye	
8	0458	X								X			X			1 Eye	
9	0459	X						X				X					
10	0460	X						X				X					
11	0461	X						X				X					
12	0462	X						X				X					
13	0463	X						X				X					
14	0464	X						X				X					
15	0465			X				X				X					

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

I HEREBY AUTHORIZE THE OWNER TO CLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. 505

DATE 2017-02-03

TIME 15485

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

*COPY*FORM
APPROVED
OMB NO.
0579-0160

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	VSLD 0466 X							X				X					
17) 0467				X				X				X				
18	0468 X								X			X					
19	0469 X								X						X		
20	0470 X								X						X		
21	0471 X								X			X					
22	0472 X									X		X					
23	0473 X								X						X		
24	0474 X								X			X					
25	0475 X								X						X		
26	0476			X					X						X		
27	0477		X						X			X					
28	0478 X									X			X		X		
29	0479 X								X			X					
30	V 0480 X								X			X					
31																	
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SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue June 28, 2016	Certificate Number VS-PA-16-CA-006-00017305
--	---------------------------------------	---

1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525		2. Consignee: CAVEL CANADA EXPORT INC 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA		4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada		6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038		8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: June 28, 2016		10. Means Of Transport: Truck
11. *****		12. CITES Permit Number: *****
13. Description Of Commodity: Horses		14. Date Of Inspection: 06/26/2016
15. Total Quantity: 30		16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck		
18. Identification / Seal Numbers: *****		
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)		
***** ***** *****		

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
June 28, 2016

Certificate Number
VS-PA-16-CA-006-00017305

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0001	Sorrel	Quarter Horse	12 Years	Neutered Male		BLAZE	None	None	None	None	None	
2	0002	Bay	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
3	0003	Sorrel	Quarter Horse	9 Years	Female		STAR	None	None	None	fetlock	None	
4	0004	Roan	Quarter Horse	8 Years	Female		BLAZE	None	sock	sock	fetlock	FETLOCK	
5	0005	Sorrel	Quarter Horse	10 Years	Neutered Male		BLAZE	None	None	None	None	PASTERN	
6	0006	Bay	Quarter Horse	12 Years	Female		STAR	None	None	None	None	None	
7	0007	Black	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	None	
8	0008	Roan	Quarter Horse	5 Years	Neutered Male		STAR	None	None	None	fetlock	FETLOCK	
9	0009	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	None	None	STOCKING	
10	0010	Sorrel	Quarter Horse	15 Years	Neutered Male		BLAZE	None	None	None	fetlock	FETLOCK	
11	0011	Sorrel	Quarter Horse	8 Years	Female		STAR	None	None	None	None	PASTERN	
12	0012	Sorrel	Quarter Horse	3 Years	Neutered Male		STAR	None	None	None	None	None	
13	0013	Bay	Quarter Horse	8 Years	Neutered Male		BLAZE	None	None	None	None	None	
14	0014	BAY&WHITE	Paint	5 Years	Neutered Male		BLAZE	None	None	None	PASTERN	PASTERN	
15	0015	Palomino	Quarter Horse	9 Years	Female		BLAZE	None	SOCK	FETLOCK	fetlock	None	
16	0016	Sorrel	Quarter Horse	12 Years	Female		STAR	None	None	None	None	None	
17	0017	SORREL & WHITE	Paint	10 Years	Female		WHITE FACE	None	None	None	None	FETLOCK	
18	0018	Bay	Quarter Horse	12 Years	Neutered Male		STAR	None	None	None	None	None	
19	0019	Bay	Quarter Horse	20 Years	Neutered Male		STAR STRIPE SNIP	None	SOCK	None	fetlock	FETLOCK	
20	0020	Bay	Standardbred	14 Years	Female		None	None	None	None	None	None	
21	0021	Bay	Standardbred	14 Years	Neutered Male		STAR	None	None	None	None	PASTERN	
22	0022	Sorrel	Saddlebred	12 Years	Neutered Male		STAR	None	SOCK	None	fetlock	FETLOCK	
23	0023	Sorrel	Quarter Horse	16 Years	Neutered Male		BLAZE	None	None	None	fetlock	PASTERN	
24	0024	Bay	Standardbred	15 Years	Neutered Male		STAR	None	SOCK	None	PASTERN	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

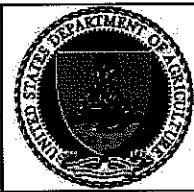
Date Of Issue
June 28, 2016

Certificate Number
VS-PA-16-CA-006-00017305

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
25	0025	Black	Standardbred	14 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	PASTERN	
26	0026	Bay	Standardbred	12 Years	Neutered Male		STAR	None	None	None	SOCK	PASTERN	
27	0027	Sorrel	Quarter Horse	12 Years	Neutered Male		STAR STRIPE	None	None	None	fetlock	FETLOCK	
28	0028	Bay	Standardbred	16 Years	Female		BLAZE	None	None	None	None	None	
29	0029	Bay	Quarter Horse	10 Years	Male		STAR	None	None	None	None	None	
30	0030	Bay	Quarter Horse	5 Years	Male		STRIPE SNIP	None	CORONET	None	PASTERN	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue June 28, 2016	Certificate Number VS-PA-16-CA-006-00017305
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian DONALD YORLETS	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date June 28, 2016	Date June 28, 2016

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue June 28, 2016	Certificate Number VS-PA-16-CA-006-00017305
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1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525		2. Consignee: CAVEL CANADA EXPORT INC 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada	
3. Country Of Origin: USA		4. State Of Origin: Pennsylvania	
5. Country Of Destination: Canada		6. Zone Of Destination: *****	
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038		8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port	
9. Estimated Date Of Shipment: June 28, 2016		10. Means Of Transport: Truck	
11. *****		12. CITES Permit Number: *****	
13. Description Of Commodity: Horses		14. Date Of Inspection: 06/26/2016	
15. Total Quantity: 30		16. Additional Information: *****	
17. Total Number Of Packages/Containers: 1 Truck			
18. Identification / Seal Numbers: *****			
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Admission: Permanent Import	
21. Identification Of Commodities: (See next page)			

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
June 28, 2016

Certificate Number
VS-PA-16-CA-006-00017305

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0001	Sorrel	Quarter Horse	12 Years	Neutered Male		BLAZE	None	None	None	None	None	
2	0002	Bay	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
3	0003	Sorrel	Quarter Horse	9 Years	Female		STAR	None	None	None	fetlock	None	
4	0004	Roan	Quarter Horse	8 Years	Female		BLAZE	None	sock	sock	fetlock	FETLOCK	
5	0005	Sorrel	Quarter Horse	10 Years	Neutered Male		BLAZE	None	None	None	None	PASTERN	
6	0006	Bay	Quarter Horse	12 Years	Female		STAR	None	None	None	None	None	
7	0007	Black	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	None	
8	0008	Roan	Quarter Horse	5 Years	Neutered Male		STAR	None	None	None	fetlock	FETLOCK	
9	0009	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	None	None	STOCKING	
10	0010	Sorrel	Quarter Horse	15 Years	Neutered Male		BLAZE	None	None	None	fetlock	FETLOCK	
11	0011	Sorrel	Quarter Horse	8 Years	Female		STAR	None	None	None	None	PASTERN	
12	0012	Sorrel	Quarter Horse	3 Years	Neutered Male		STAR	None	None	None	None	None	
13	0013	Bay	Quarter Horse	8 Years	Neutered Male		BLAZE	None	None	None	None	None	
14	0014	BAY&WHITE	Paint	5 Years	Neutered Male		BLAZE	None	None	None	PASTERN	PASTERN	
15	0015	Palomino	Quarter Horse	9 Years	Female		BLAZE	None	SOCK	FETLOCK	fetlock	None	
16	0016	Sorrel	Quarter Horse	12 Years	Female		STAR	None	None	None	None	None	
17	0017	SORREL & WHITE	Paint	10 Years	Female		WHITE FACE	None	None	None	None	FETLOCK	
18	0018	Bay	Quarter Horse	12 Years	Neutered Male		STAR	None	None	None	None	None	
19	0019	Bay	Quarter Horse	20 Years	Neutered Male		STAR STRIPE SNIP	None	SOCK	None	fetlock	FETLOCK	
20	0020	Bay	Standardbred	14 Years	Female		None	None	None	None	None	None	
21	0021	Bay	Standardbred	14 Years	Neutered Male		STAR	None	None	None	None	PASTERN	
22	0022	Sorrel	Saddlebred	12 Years	Neutered Male		STAR	None	SOCK	None	fetlock	FETLOCK	
23	0023	Sorrel	Quarter Horse	16 Years	Neutered Male		BLAZE	None	None	None	fetlock	PASTERN	
24	0024	Bay	Standardbred	15 Years	Neutered Male		STAR	None	SOCK	None	PASTERN	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue

June 28, 2016

Certificate Number

VS-PA-16-CA-006-00017305

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
25	0025	Black	Standardbred	14 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	PASTERN	
26	0026	Bay	Standardbred	12 Years	Neutered Male		STAR	None	None	None	SOCK	PASTERN	
27	0027	Sorrel	Quarter Horse	12 Years	Neutered Male		STAR STRIPE	None	None	None	fetlock	FETLOCK	
28	0028	Bay	Standardbred	16 Years	Female		BLAZE	None	None	None	None	None	
29	0029	Bay	Quarter Horse	10 Years	Male		STAR	None	None	None	None	None	
30	0030	Bay	Quarter Horse	5 Years	Male		STRIPE SNIP	None	CORONET	None	PASTERN	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue June 28, 2016	Certificate Number VS-PA-16-CA-006-00017305
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian DONALD YORLETS	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date June 28, 2016	Date June 28, 2016

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET
CONSIGNOR (OWNER/SHIPPER) NAME <i>Brian Moore</i> STREET ADDRESS (b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME <i>Gavel Canada Export Frc</i> STREET ADDRESS <i>517 Range St. Suite est</i>
CITY, STATE, ZIP CODE <i>Sonestown Pa 17038</i>		CITY, STATE, ZIP CODE <i>St. Andre-Avelin</i>
AREA CODE & TELEPHONE NO. (b)(6)		AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION					BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS include existing conditions
		Bay	Grey	Bk.	Pinto	Chestn	Other	TB	OT	Draft	Pony	Other	Mare	Stal	Geld	
1	USLD 0001				X			X							X	
2	0002 X							X					X			
3	0003				X			X					X			
4	0004					X		X					X			IEKE
5	0005				X			X							X	
6	0006 X							X					X			IEKE
7	0007	X						X							X	
8	0008				X			X							X	
9	0009					X		X					X			
10	0010				X			X							X	
11	0011					X		X					X			
12	0012				X			X							X	
13	0013 X							X							X	
14	0014		X									X			X	
15	0015				X		X						X			

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)
SIG

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)
EST.
DATE
TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)
EST.
DATE
TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION					BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chesin	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	0016				X				X				X			
17	0017			X								X	X			
18	0018	X							X						X	
19	0019	X							X						X	
20	0020	X											X	X		
21	0021			X								X		X		
22	0022			X								X		X		
23	0023			X			X							X		
24	0024	X										X		X		
25	0025		X									X	X			
26	0026	X										X		X		
27	0027			X			X							X		
28	0028	X											X	X		
29	0029	X							X						X	
30	0030	X							X					X		
31																
32																
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I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

(b) (6)

at the information contained in this form is true and correct to the best of my knowledge.)

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD

PO BOX 205 4698 YORK ROAD

NEW OXFORD, PA 17350

Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

17305, are accompanied with an Equine Information Document properly completed

and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian



Date of signature 6/28/16



**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue July 7, 2016	Certificate Number VS-PA-16-CA-006-00017554
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1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: CAVEL CANADA EXPORT INC 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: July 7, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: 07/03/2016
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	
***** ***** *****	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 7, 2016

Certificate Number
VS-PA-16-CA-006-00017554

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0031	Bay	Standardbred	16 Years	Neutered Male		FEW HAIRS	None	None	None	None	CORONET	
2	0032	Chestnut	Quarter Horse	14 Years	Female		STAR	None	None	None	None	None	
3	0033	Bay	Quarter Horse	12 Years	Female		BLAZE	None	CORONET	CORONET	fetlock	FETLOCK	
4	0034	Sorrel	Quarter Horse	18 Years	Neutered Male		STAR	None	None	None	PASTERN	None	
5	0035	Skewbald	Paint	20 Years	Female		BLAZE	None	ALL	ALL	ALL	ALL	
6	0036	Palomino	Quarter Horse	14 Years	Female		STAR	None	None	None	None	None	
7	0037	DARK CHESTNUT	Quarter Horse	15 Years	Neutered Male		STAR	None	None	None	PASTERN	None	
8	0038	Bay	Standardbred	12 Years	Neutered Male		None	None	None	None	CORONET	CORONET	
9	0039	Bay	Standardbred	14 Years	Neutered Male		None	None	None	None	CORONET	None	
10	0040	Bay	Standardbred	10 Years	Neutered Male		STAR	None	None	None	PASTERN	PASTERN	
11	0041	Bay	Standardbred	13 Years	Neutered Male		None	None	None	None	None	None	
12	0042	BAY-BROWN	Standardbred	9 Years	Neutered Male		STAR FEW HAIRS	None	None	None	None	None	
13	0043	Bay	Standardbred	8 Years	Female		STAR	None	None	None	PASTERN	None	
14	0044	Bay	Quarter Horse	4 Years	Female		STAR	None	CORONET	None	None	None	
15	0045	Bay	Standardbred	6 Years	Neutered Male		None	None	None	None	CORONET	None	
16	0046	Bay	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	CORONET	
17	0047	Chestnut	Standardbred	23 Years	Neutered Male		STAR STRIPE SNIP	None	None	PASTERN	PASTERN	None	ONE EYE
18	0048	DARK BAY	Standardbred	16 Years	Neutered Male		STAR	None	None	None	None	None	
19	0049	Black	Quarter Horse	9 Years	Neutered Male		STAR SNIP	None	None	None	None	None	
20	0050	LIGHT CHESTNUT	Saddlebred	12 Years	Neutered Male		STAR STRIPE	None	None	None	CORONET	CORONET	
21	0051	Bay	Quarter Horse	10 Years	Neutered Male		STAR FEW HAIRS	None	None	None	PASTERN	None	
22	0052	Sorrel	Quarter Horse	14 Years	Female		BLAZE	None	None	None	fetlock	None	
23	0053	Chestnut	Quarter Horse	18 Years	Neutered Male		STAR	None	None	None	None	CORONET	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 7, 2016

Certificate Number
VS-PA-16-CA-006-00017554

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
24	0054	Chestnut	Quarter Horse	9 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
25	0055	Piebald	Paint	14 Years	Female		STAR STRIPE SNIP	None	KNEE	ALL	fetlock	HOCK	
26	0056	Bay	Standardbred	15 Years	Neutered Male		STAR STRIPE SNIP	None	CORONET	None	None	PASTERN	
27	0057	Sorrel	Saddlebred	12 Years	Female		STAR SNIP	None	None	None	fetlock	FETLOCK	
28	0058	Bay	Quarter Horse	10 Years	Female		BLAZE	None	PASTERN	PASTERN	PASTERN	PASTERN	
29	0059	Bay	Quarter Horse	5 Years	Neutered Male		STAR	None	None	None	PASTERN	PASTERN	
30	0060	DARK CHESTNUT	Quarter Horse	7 Years	Male		Star stripe	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue July 7, 2016	Certificate Number VS-PA-16-CA-006-00017554
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
 - The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

(Handwritten signature of Donald Yorlets)

Name of Accredited Veterinarian DONALD YORLETS	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian <i>F. D. Brown Jr. DVM</i>
Date July 7, 2016	Date July 7, 2016

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue July 7, 2016	Certificate Number VS-PA-16-CA-006-00017554
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1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525		2. Consignee: CAVEL CANADA EXPORT INC 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada	
3. Country Of Origin: USA		4. State Of Origin: Pennsylvania	
5. Country Of Destination: Canada		6. Zone Of Destination: ****	
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038		8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port	
9. Estimated Date Of Shipment: July 7, 2016		10. Means Of Transport: Truck	
11. ****		12. CITES Permit Number: ****	
13. Description Of Commodity: Horses		14. Date Of Inspection: 07/03/2016	
15. Total Quantity: 30		16. Additional Information: ****	
17. Total Number Of Packages/Containers: 1 Truck			
18. Identification / Seal Numbers: ****			
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Admission: Permanent Import	
21. Identification Of Commodities: (See next page)			
**** **** ****			

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 7, 2016

Certificate Number
VS-PA-16-CA-006-00017554

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0031	Bay	Standardbred	16 Years	Neutered Male		FEW HAIRS	None	None	None	None	CORONET	
2	0032	Chestnut	Quarter Horse	14 Years	Female		STAR	None	None	None	None	None	
3	0033	Bay	Quarter Horse	12 Years	Female		BLAZE	None	CORONET	CORONET	fetlock	FETLOCK	
4	0034	Sorrel	Quarter Horse	18 Years	Neutered Male		STAR	None	None	None	PASTERN	None	
5	0035	Skewbald	Paint	20 Years	Female		BLAZE	None	ALL	ALL	ALL	ALL	
6	0036	Palomino	Quarter Horse	14 Years	Female		STAR	None	None	None	None	None	
7	0037	DARK CHESTNUT	Quarter Horse	15 Years	Neutered Male		STAR	None	None	None	PASTERN	None	
8	0038	Bay	Standardbred	12 Years	Neutered Male		None	None	None	None	CORONET	CORONET	
9	0039	Bay	Standardbred	14 Years	Neutered Male		None	None	None	None	CORONET	None	
10	0040	Bay	Standardbred	10 Years	Neutered Male		STAR	None	None	None	PASTERN	PASTERN	
11	0041	Bay	Standardbred	13 Years	Neutered Male		None	None	None	None	None	None	
12	0042	BAY-BROWN	Standardbred	9 Years	Neutered Male		STAR FEW HAIRS	None	None	None	None	None	
13	0043	Bay	Standardbred	8 Years	Female		STAR	None	None	None	PASTERN	None	
14	0044	Bay	Quarter Horse	4 Years	Female		STAR	None	CORONET	None	None	None	
15	0045	Bay	Standardbred	8 Years	Neutered Male		None	None	None	None	CORONET	None	
16	0046	Bay	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	CORONET	
17	0047	Chestnut	Standardbred	23 Years	Neutered Male		STAR STRIPE SNIP	None	None	PASTERN	PASTERN	None	ONE EYE
18	0048	DARK BAY	Standardbred	16 Years	Neutered Male		STAR	None	None	None	None	None	
19	0049	Black	Quarter Horse	9 Years	Neutered Male		STAR SNIP	None	None	None	None	None	
20	0050	LIGHT CHESTNUT	Saddlebred	12 Years	Neutered Male		STAR STRIPE	None	None	None	CORONET	CORONET	
21	0051	Bay	Quarter Horse	10 Years	Neutered Male		STAR FEW HAIRS	None	None	None	PASTERN	None	
22	0052	Sorrel	Quarter Horse	14 Years	Female		BLAZE	None	None	None	fetlock	None	
23	0053	Chestnut	Quarter Horse	18 Years	Neutered Male		STAR	None	None	None	None	CORONET	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 7, 2016

Certificate Number
VS-PA-16-CA-006-00017554

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
24	0054	Chestnut	Quarter Horse	9 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
25	0055	Piebald	Paint	14 Years	Female		STAR STRIPE SNIP	None	KNEE	ALL	fetlock	HOCK	
26	0056	Bay	Standardbred	15 Years	Neutered Male		STAR STRIPE SNIP	None	CORONET	None	None	PASTERN	
27	0057	Sorrel	Saddlebred	12 Years	Female		STAR SNIP	None	None	None	fetlock	FETLOCK	
28	0058	Bay	Quarter Horse	10 Years	Female		BLAZE	None	PASTERN	PASTERN	PASTERN	PASTERN	
29	0059	Bay	Quarter Horse	5 Years	Neutered Male		STAR	None	None	None	PASTERN	PASTERN	
30	0060	DARK CHESTNUT	Quarter Horse	7 Years	Male		Star stripe	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority	Date Of Issue	Certificate Number
UNITED STATES DEPARTMENT OF AGRICULTURE	July 7, 2016	VS-PA-16-CA-006-00017554

Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
3. The animals have resided in the United States or Canada since birth.
4. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
5. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
6. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
7. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian

DONALD YORLETS

Name of USDA Veterinarian

F. D. Brown Jr. DVM, VMO

Signature of Accredited Veterinarian

Electronically Signed

Signature of USDA Veterinarian

Date

July 7, 2016

Date

July 7, 2016

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD
PO BOX 205 4698 YORK ROAD
NEW OXFORD, PA 17350

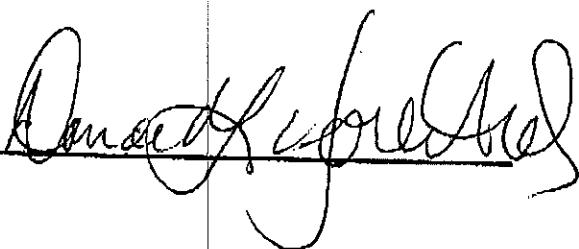
Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

17554, are accompanied with an Equine Information Document properly completed and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian



Date of signature 7-7-16

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

VEHICLE LICENSE NO. AND DRIVER'S NAME

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

CONSIGNEE (RECEIVER/DESTINATION) NAME

Javel Canada Export Inc

(b)(6)

STREET ADDRESS

517 Range St. Suite Est

CITY, STATE, ZIP CODE

Somestown Pa 17038

CITY, STATE, ZIP CODE

St. Andre Acrillia

AREA CODE & TELEPHONE NO.

AREA CODE & TELEPHONE NO.

(b)(6)

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	155L0031	X											X			X	
2	0032					X			X					X			
3	0033	X											X				
4	0034				X			X							X		
5	0035		X										X	X			
6	0036					X		X					X				
7	0037				X			X							X		
8	0038	X											X			X	
9	0039	X											X			X	
10	0040	X											X			X	
11	0041	X											X			X	
12	0042	X											X			X	
13	0043	X											X	X			
14	0044	X						X					X	X			
15	0045	X											X			X	

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGNATURE

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

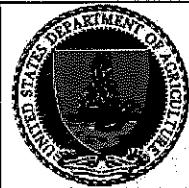
TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	USL 0046	X							X						X	
17	0047					X						X			X	
18	0048	X										X			X	
19	0049		X					X							X	
20	0050			X								X			X	
21	0051	X						X							X	
22	0052			X				X				X			X	
23	0053		X					X							X	
24	0054		X					X							X	
25	0055		X									X	X			
26	0056	X										X			X	
27	0057			X								X	X			
28	0058	X						X					X			
29	0059	X						X					X			
30	0060			X				X					X		X	
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I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

(b) (6)

Information contained in this form is true and correct to the best of my knowledge.)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority

UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue

July 14, 2016

Certificate Number

VS-PA-16-CA-006-00017770

1. Consignor:

BRIAN S. MOORE
(b)(6)
JONESTOWN, PA 17038
United States
Phone No. (b)(6)
Fax No. 717-865-2525

2. Consignee:

CAVEL CANADA EXPORT INC
517 RANG STE - JULIE EST
ST - ANDRE - AVELLIN, QUEBEC J0V 1W0
Canada

3. Country Of Origin:

USA

4. State Of Origin:

Pennsylvania

5. Country Of Destination:

Canada

6. Zone Of Destination:

7. Place Of Origin:

BRIAN S. MOORE
(b)(6)
JONESTOWN, PA 17038

8. Port Of Embarkation / Border Crossing:

NY - Champlain - Border Port

9. Estimated Date Of Shipment:

July 14, 2016

10. Means Of Transport:

Truck

11. *****

12. CITES Permit Number:

13. Description Of Commodity:

Horses

14. Date Of Inspection:

15. Total Quantity:

30

16. Additional Information:

17. Total Number Of Packages/Containers:

1 Truck

18. Identification / Seal Numbers:

19. Commodities Intended Use:

Immediate Slaughter

20. Type Of Admission:

Permanent Import

21. Identification Of Commodities:

(See next page)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 14, 2016

Certificate Number
VS-PA-16-CA-006-00017770

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0061	Piebald	Paint	16 Years	Female		BLAZE	None	KNEE	PASTERN	PASTERN	None	
2	0062	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	None	None	None	
3	0063	Bay	Quarter Horse	18 Years	Neutered Male		None	None	None	None	None	None	
4	0064	Sorrel	Quarter Horse	9 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
5	0065	Bay	Standardbred	19 Years	Neutered Male		FEW HAIRS	None	None	None	None	None	
6	0066	Bay	Standardbred	21 Years	Female		STAR	None	None	None	None	None	
7	0067	Bay	Standardbred	15 Years	Neutered Male		STAR	None	PASTERN	PASTERN	None	None	
8	0068	Sorrel	Quarter Horse	8 Years	Neutered Male		None	None	None	None	None	None	
9	0069	Sorrel	Quarter Horse	12 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
10	0070	Roan	Quarter Horse	14 Years	Female		STAR STRIPE SNIP	None	None	FETLOCK	fetlock	FETLOCK	
11	0071	Sorrel	Tennessee Walking Horse	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
12	0072	Black	Quarter Horse	9 Years	Female		None	None	None	None	None	None	
13	0073	Bay	Standardbred	15 Years	Neutered Male		None	None	None	None	None	None	
14	0074	Bay	Standardbred	16 Years	Female		None	None	None	None	None	None	
15	0075	Sorrel	Quarter Horse	10 Years	Female		STAR SNIP	None	None	None	None	PASTERN	
16	0076	Bay	Standardbred	9 Years	Neutered Male		None	None	PASTERN	PASTERN	None	FETLOCK	
17	0077	Bay	Standardbred	14 Years	Neutered Male		STAR STRIPE SNIP	None	None	PASTERN	fetlock	FETLOCK	
18	0078	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	FETLOCK	FETLOCK	ANTERIOR	FETLOCK	
19	0079	Bay	Standardbred	16 Years	Neutered Male		None	None	None	None	None	None	
20	0080	Bay	Standardbred	12 Years	Female		STAR	None	None	None	None	FETLOCK	
21	0081	Sorrel	Quarter Horse	9 Years	Female		STAR STRIPE	None	None	None	None	None	
22	0082	Sorrel	Quarter Horse	18 Years	Neutered Male		BLAZE	None	PASTERN	CORONET	CORONET	CORONET	
23	0083	Skewbald	Paint	10 Years	Female		BLAZE	None	None	None	None	None	
24	0084	Bay	Standardbred	16 Years	Neutered Male		None	None	PASTERN	PASTERN	PASTERN	ANTERIOR	
25	0085	Bay	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
26	0086	Black	Quarter Horse	9 Years	Female		STAR STRIPE	None	A L	None	None	PASTERN	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 14, 2016

Certificate Number
VS-PA-16-CA-006-00017770

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
27	0087	Piebald	Paint	15 Years	Female		BLAZE	None	LEG	LEG	LEG	LEG	
28	0088	Skewbald	Paint	28 Years	Neutered Male		BLAZE	None	KNEE	KNEE	HIND QTR	HIND QTR	
29	0089	Sorrel	Tennessee Walking Horse	21 Years	Neutered Male		BLAZE	None	PASTERN	PASTERN	fetlock	FETLOCK	
30	0090	Grey	Tennessee Walking Horse	23 Years	Neutered Male		None	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**

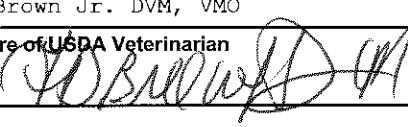


Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue July 14, 2016	Certificate Number VS-PA-16-CA-006-00017770
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian DONALD YORLETS	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian 
Date July 14, 2016	Date July 14, 2016

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue July 14, 2016	Certificate Number VS-PA-16-CA-006-00017770
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1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: CAVEL CANADA EXPORT INC 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC JOV 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: July 14, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 14, 2016

Certificate Number
VS-PA-16-CA-006-00017770

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0061	Piebald	Paint	16 Years	Female		BLAZE	None	KNEE	PASTERN	PASTERN	None	
2	0062	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	None	None	None	
3	0063	Bay	Quarter Horse	18 Years	Neutered Male		None	None	None	None	None	None	
4	0064	Sorrel	Quarter Horse	9 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
5	0065	Bay	Standardbred	19 Years	Neutered Male		FEW HAIRS	None	None	None	None	None	
6	0066	Bay	Standardbred	21 Years	Female		STAR	None	None	None	None	None	
7	0067	Bay	Standardbred	15 Years	Neutered Male		STAR	None	PASTERN	PASTERN	None	None	
8	0068	Sorrel	Quarter Horse	8 Years	Neutered Male		None	None	None	None	None	None	
9	0069	Sorrel	Quarter Horse	12 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
10	0070	Roan	Quarter Horse	14 Years	Female		STAR STRIPE SNIP	None	None	FETLOCK	fetlock	FETLOCK	
11	0071	Sorrel	Tennessee Walking Horse	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
12	0072	Black	Quarter Horse	9 Years	Female		None	None	None	None	None	None	
13	0073	Bay	Standardbred	15 Years	Neutered Male		None	None	None	None	None	None	
14	0074	Bay	Standardbred	16 Years	Female		None	None	None	None	None	None	
15	0075	Sorrel	Quarter Horse	10 Years	Female		STAR SNIP	None	None	None	None	PASTERN	
16	0076	Bay	Standardbred	9 Years	Neutered Male		None	None	PASTERN	PASTERN	None	FETLOCK	
17	0077	Bay	Standardbred	14 Years	Neutered Male		STAR STRIPE SNIP	None	PASTERN	fetlock	FETLOCK		
18	0078	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	FETLOCK	FETLOCK	ANTERIOR	FETLOCK	
19	0079	Bay	Standardbred	16 Years	Neutered Male		None	None	None	None	None	None	
20	0080	Bay	Standardbred	12 Years	Female		STAR	None	None	None	None	FETLOCK	
21	0081	Sorrel	Quarter Horse	9 Years	Female		STAR STRIPE	None	None	None	None	None	
22	0082	Sorrel	Quarter Horse	18 Years	Neutered Male		BLAZE	None	PASTERN	CORONET	CORONET	CORONET	
23	0083	Skewbald	Paint	10 Years	Female		BLAZE	None	None	None	None	None	
24	0084	Bay	Standardbred	16 Years	Neutered Male		None	None	PASTERN	PASTERN	PASTERN	ANTERIOR	
25	0085	Bay	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
26	0086	Black	Quarter Horse	9 Years	Female		STAR STRIPE	None	A L	None	None	PASTERN	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
July 14, 2016

Certificate Number
VS-PA-16-CA-006-00017770

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
27	0087	Piebald	Paint	15 Years	Female		BLAZE	None	LEG	LEG	LEG	LEG	
28	0088	Skewbald	Paint	28 Years	Neutered Male		BLAZE	None	KNEE	KNEE	HIND QTR	HIND QTR	
29	0089	Sorrel	Tennessee Walking Horse	21 Years	Neutered Male		BLAZE	None	PASTERN	PASTERN	fetlock	FETLOCK	
30	0090	Grey	Tennessee Walking Horse	23 Years	Neutered Male		None	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue July 14, 2016	Certificate Number VS-PA-16-CA-006-0001777C
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
 - The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported causing the animal to suffer.

Name of Accredited Veterinarian DONALD YORLETS	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date July 14, 2016	Date July 14, 2016

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD

PO BOX 205 4698 YORK ROAD

NEW OXFORD, PA 17350

Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

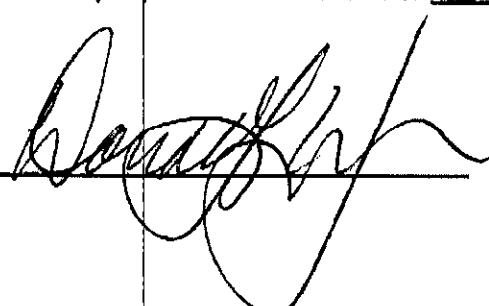
EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

17770 are accompanied with an Equine Information Document properly completed and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian

Date of signature

7/14/16

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <i>Sonestown</i>
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET <i></i>
CONSIGNOR (OWNER/SHIPPER) NAME <i>Brian Moore</i> STREET ADDRESS <i></i> (b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME <i>Avei Canada Export Inc</i> STREET ADDRESS <i>517 Range St. Joliet Est</i>
CITY, STATE, ZIP CODE <i>Sonestown PA 17038</i>		CITY, STATE, ZIP CODE <i>St Andre - Arellis</i>
AREA CODE & TELEPHONE NO. (b)(6)		AREA CODE & TELEPHONE NO. <i></i>

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0061			X								X	X				
2	0062				X			X					X				
3	0063	X										X				X	
4	0064				X			X								X	
5	0065	X										X				X	
6	0066	X										X	X				
7	0067	X										X				X	
8	0068				X			X								X	
9	0069				X			X								X	
10	0070					X		X					X				
11	0071					X			X							X	
12	0072		X					X					X				
13	0073	X										X				X	
14	0074	X										X	X				
15	✓ 0075				X			X					X				

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SI

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	USLD 0076	X									X				X	
17	0077	X									X				X	
18	0078				X			X				X		X		
19	0079	X									X				X	
20	0080	X									X	X				
21	0081				X			X				X				
22	0082				X			X						X		
23	0083		X								X	X				
24	0084	X									X				X	
25	0085	X						X				X				
26	0086		X					X				X				
27	0087		X								X	X				
28	0088		X								X			X		
29	0089			X				X						X		
30	0090	X						X						X		
31																
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SIGN(b) (6)

at the information contained in this form is true and correct to the best of my knowledge.

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue August 30, 2016	Certificate Number VS-PA-16-CA-006-00018911
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1. Consignor: BRITAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525		2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA		4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada		6. Zone Of Destination: *****
7. Place Of Origin: BRITAN S. MOORE (b)(6) JONESTOWN, PA 17038		8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: August 30, 2016		10. Means Of Transport: Truck
11. *****		12. CITES Permit Number: *****
13. Description Of Commodity: Horses		14. Date Of Inspection: *****
15. Total Quantity: 30		16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck		
18. Identification / Seal Numbers: *****		
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)		
***** ***** *****		

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue August 30, 2016	Certificate Number VS-PA-16-CA-006-00018911
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21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0091	Bay	Standardbred	15 Years	Female		None	None	None	None	CORONET	CORONET	
2	0092	Palomino	Quarter Horse	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
3	0093	Skewbald	Paint	7 Years	Female		STAR	None	KNEE	KNEE	HOCK	HOCK	
4	0094	Bay	Quarter Horse	6 Years	Female		STAR	None	None	None	None	None	
5	0095	Skewbald	Paint	5 Years	Neutered Male		BLAZE	None	KNEE	KNEE	HIND QTR	HIND QTR	
6	0096	Sorrel	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	None	
7	0097	Skewbald	Paint	14 Years	Female		BLAZE	None	KNEE	KNEE	HOCK	HOCK	
8	0098	Sorrel	Quarter Horse	8 Years	Neutered Male		STRIP SNIP	None	CORONET	None	None	None	
9	0099	Bay	Quarter Horse	5 Years	Neutered Male		STAR	None	None	None	None	None	
10	0100	Bay	Quarter Horse	6 Years	Neutered Male		STAR	None	None	PASTERN	fetlock	None	
11	0101	Sorrel	Quarter Horse	8 Years	Neutered Male		STAR STRIPE	None	None	None	fetlock	None	
12	0102	Roan	Quarter Horse	7 Years	Neutered Male		STAR STRIPE SNIP	None	PASTERN	None	None	None	
13	0103	Bay	Standardbred	14 Years	Female		STAR	None	None	None	None	None	
14	0104	Bay	Standardbred	12 Years	Female		None	None	CORONET	None	PASTERN	PASTERN	
15	0105	Skewbald	Paint	10 Years	Female		STAR	None	KNEE	KNEE	HIND QTR	HIND QTR	
16	0106	Sorrel	Quarter Horse	14 Years	Female		BLAZE	None	None	None	None	FETLOCK	
17	0107	Bay	Quarter Horse	9 Years	Female		STAR	None	None	None	None	None	
18	0108	Dun	Quarter Horse	15 Years	Female		STAR STRIPE SNIP	None	None	None	None	None	
19	0109	Sorrel	Quarter Horse	8 Years	Female		None	None	None	None	None	None	
20	0110	Bay	Quarter Horse	16 Years	Neutered Male		STAR	None	None	None	fetlock	FETLOCK	
21	0111	Sorrel	Quarter Horse	9 Years	Female		BLAZE	None	None	None	fetlock	PASTERN	
22	0112	Skewbald	Paint	10 Years	Neutered Male		BLAZE	None	KNEE	KNEE	HOCK	HOCK	
23	0113	Sorrel	Quarter Horse	15 Years	Neutered Male		BLAZE	None	PASTERN	None	fetlock	FETLOCK	
24	0114	Black	Quarter Horse	8 Years	Female		STAR	None	None	None	None	None	
25	0115	Bay	Quarter Horse	16 Years	Female		STAR	None	None	None	PASTERN	PASTERN	
26	0116	Sorrel	Quarter Horse	12 Years	Female		BLAZE	None	None	None	FETLOCK	ONE EYE	
27	0117	Skewbald	Quarter Horse	7 Years	Male		BLAZE	None	LIGHT LEGS	LIGHT LEGS	HIND QUARTER	HOCK	
28	0118	Sorrel	Quarter Horse	9 Years	Neutered		BLAZE	None	None	None	FETLOCK	FETLOCK	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
August 30, 2016

Certificate Number
VS-PA-16-CA-006-00018911

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
29	0119	Bay	Standardbred	11 Years	Neutered Male		STAR SNIP	None	None	None	None	None	
30	0120	Sorrel	Quarter Horse	5 Years	Male		None	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue August 30, 2016	Certificate Number VS-PA-16-CA-006-00018911
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
 - The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date August 30, 2016	Date August 30, 2016

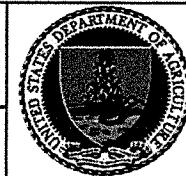
**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue August 30, 2016	Certificate Number VS-PA-16-CA-006-00018911
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1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: August 30, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
August 30, 2016

Certificate Number
VS-PA-16-CA-006-00018911

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0091	Bay	Standardbred	15 Years	Female		None	None	None	None	CORONET	CORONET	
2	0092	Palomino	Quarter Horse	20 Years	Neutered	Male	BLAZE	None	None	None	None	None	
3	0093	Skewbald	Paint	7 Years	Female		STAR	None	KNEE	KNEE	HOCK	HOCK	
4	0094	Bay	Quarter Horse	6 Years	Female		STAR	None	None	None	None	None	
5	0095	Skewbald	Paint	5 Years	Neutered	Male	BLAZE	None	KNEE	KNEE	HIND QTR	HIND QTR	
6	0096	Sorrel	Quarter Horse	10 Years	Neutered	Male	STAR	None	None	None	None	None	
7	0097	Skewbald	Paint	14 Years	Female		BLAZE	None	KNEE	KNEE	HOCK	HOCK	
8	0098	Sorrel	Quarter Horse	8 Years	Neutered	Male	STRIP SNIP	None	CORONET	None	None	None	
9	0099	Bay	Quarter Horse	5 Years	Neutered	Male	STAR	None	None	None	None	None	
10	0100	Bay	Quarter Horse	6 Years	Neutered	Male	STAR	None	None	PASTERN	fetlock	None	
11	0101	Sorrel	Quarter Horse	8 Years	Neutered	Male	STAR STRIPE	None	None	None	fetlock	None	
12	0102	Roan	Quarter Horse	7 Years	Neutered	Male	STAR STRIPE SNIP	None	PASTERN	None	None	None	
13	0103	Bay	Standardbred	14 Years	Female		STAR	None	None	None	None	None	
14	0104	Bay	Standardbred	12 Years	Female		None	None	CORONET	None	PASTERN	PASTERN	
15	0105	Skewbald	Paint	10 Years	Female		STAR	None	KNEE	KNEE	HIND QTR	HIND QTR	
16	0106	Sorrel	Quarter Horse	14 Years	Female		BLAZE	None	None	None	None	FETLOCK	
17	0107	Bay	Quarter Horse	9 Years	Female		STAR	None	None	None	None	None	
18	0108	Dun	Quarter Horse	15 Years	Female		STAR STRIPE SNIP	None	None	None	None	None	
19	0109	Sorrel	Quarter Horse	8 Years	Female		None	None	None	None	None	None	
20	0110	Bay	Quarter Horse	16 Years	Neutered	Male	STAR	None	None	None	fetlock	FETLOCK	
21	0111	Sorrel	Quarter Horse	9 Years	Female		BLAZE	None	None	None	fetlock	PASTERN	
22	0112	Skewbald	Paint	10 Years	Neutered	Male	BLAZE	None	KNEE	KNEE	HOCK	HOCK	
23	0113	Sorrel	Quarter Horse	15 Years	Neutered	Male	BLAZE	None	PASTERN	None	fetlock	FETLOCK	
24	0114	Black	Quarter Horse	8 Years	Female		STAR	None	None	None	None	None	
25	0115	Bay	Quarter Horse	16 Years	Female		STAR	None	None	None	PASTERN	PASTERN	
26	0116	Sorrel	Quarter Horse	12 Years	Female		BLAZE	None	None	None	None	FETLOCK	
27	0117	Skewbald	Quarter Horse	7 Years	Male		BLAZE	None	LIGHT LEGS	LIGHT LEGS	HIND QUARTER	HOCK	ONE EYE
28	0118	Sorrel	Quarter Horse	9 Years	Neutered		BLAZE	None	None	None	FETLOCK	FETLOCK	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
August 30, 2016

Certificate Number
VS-PA-16-CA-006-00018911

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
29	0119	Bay	Standardbred	11 Years	Neutered	Male	STAR SNIP	None	None	None	None	None	None
30	0120	Sorrel	Quarter Horse	5 Years	Male	Male	None	None	None	None	None	None	None

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue August 30, 2016	Certificate Number VS-PA-16-CA-006-00018911
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date August 30, 2016	Date August 30, 2016

CIRCLE Y VETERINARY SERVICES

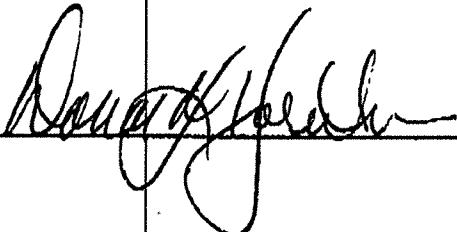
DONALD L. YORLETS, VMD
PO BOX 205 4698 YORK ROAD
NEW OXFORD, PA 17350
Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

18911 are accompanied with an Equine Information Document properly completed and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian



Date of signature 8-30-16

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <i>Sonestown Pa</i>
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET <u><u></u></u>
CONSIGNOR (OWNER/SHIPPER) NAME <i>Brian Moore</i>		CONSIGNEE (RECEIVER/DESTINATION) NAME <i>Les Viandes de la Petite Nation</i>
STREET ADDRESS (b)(6)		STREET ADDRESS <i>517 Range St, Julie Est</i>
CITY, STATE, ZIP CODE <i>Sonestown Pa 17038</i>		CITY, STATE, ZIP CODE <i>St. Andre-Avelin</i>
AREA CODE & TELEPHONE NO. (b)(6)		AREA CODE & TELEPHONE NO. <u><u></u></u>

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chesn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0091	X											X	X			
2	0092					X		X							X		
3	0093				X								X	X			
4	0094	X							X					X			
5	0095			X									X		X		
6	0096				X			X							X		
7	0097		X										X	X			
8	0098			X				X							X		
9	0099	X							X						X		
10	0100	X						X							X		
11	0101				X				X						X		
12	0102					X		X							X		
13	0103	X											X	X			
14	0104	X											X	X			
15	0105			X									X	X			

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SI

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SIGNATURE OF OWNER/SHIPPER/Loader that the information contained in this form is true and correct to
(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____

DATE _____

TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____

DATE _____

TIME _____

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

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FORM
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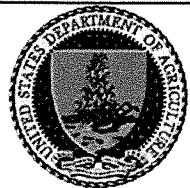
TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	USLD0106				X			X				X				
17	0107 X								X			X				
18	0108					X		X				X				
19	0109				X			X				X				
20	0110 X							X						X		
21	0111				X			X				X			X	
22	0112			X								X			X	
23	0113				X			X							X	
24	0114		X						X			X				
25	0115 X								X			X				
26	0116			X				X				X				
27	0117		X									X	X			
28	0118			X				X						X		
29	0119 X											X			X	
30	0120			X				X					X			
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SI(b) (6)

Contained in this form is true and correct to the best of my knowledge.)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue September 6, 2016	Certificate Number VS-PA-16-CA-006-00019029
--	---	---

1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: September 6, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import

21. Identification Of Commodities:

(See next page)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
September 6, 2016

Certificate Number
VS-PA-16-CA-006-00019029

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0121	Bay	Quarter Horse	4 Years	Female		None	None	None	None	None	None	
2	0122	Bay	Quarter Horse	12 Years	Neutered Male		None	None	None	None	None	None	
3	0123	Bay	Saddlebred	16 Years	Female		STAR SNIP	None	None	None	None	None	
4	0124	Sorrel	Quarter Horse	7 Years	Female		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	None	
5	0125	Bay	Standardbred	20 Years	Neutered Male		None	None	None	None	CORONET	None	
6	0126	Sorrel	Mule	18 Years	Neutered Male		WHITE MUZZLE	None	None	None	None	None	
7	0127	BAY/WHITE	Paint	6 Years	Neutered Male		STAR STRIPE SNIP	None	LIGHT	LIGHT	HIND QTR	FETLOCK	
8	0128	Sorrel	Saddlebred	15 Years	Neutered Male		STAR STRIPE	None	None	None	CORONET	None	
9	0129	Sorrel	Quarter Horse	10 Years	Female		None	None	None	None	None	None	
10	0130	Bay	Quarter Horse	16 Years	Neutered Male		None	None	None	PASTERN	FETLOCK	FETLOCK	
11	0131	Palomino	Quarter Horse	20 Years	Neutered Male		STAR	None	None	None	PASTERN	PASTERN	
12	0132	Bay	Quarter Horse	12 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	FETLOCK	None	
13	0133	Black	Quarter Horse	7 Years	Female		BLAZE	None	None	PASTERN	None	FETLOCK	
14	0134	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	None	CORONET	None	
15	0135	Sorrel	Quarter Horse	6 Years	Female		STAR STRIPE SNIP	None	None	None	None	PASTERN	
16	0136	sorrel/ white	Paint	12 Years	Neutered Male		BLAZE	None	KNEE	KNEE	HIND QTR	HIND QTR	
17	0137	Sorrel	Quarter Horse	15 Years	Female		BLAZE	None	None	None	None	None	
18	0138	Sorrel	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	None	
19	0139	Bay	Quarter Horse	14 Years	Female		STAR STRIPE SNIP	None	None	None	FETLOCK	CORONET	
20	0140	Bay	Quarter Horse	16 Years	Neutered Male		None	None	None	None	PASTERN	CORONET	
21	0141	Sorrel	Saddlebred	14 Years	Neutered Male		STAR	None	None	None	None	None	
22	0142	BUCKSKIN	Quarter Horse	12 Years	Neutered Male		STAR	None	None	None	PASTERN	None	
23	0143	Sorrel	Quarter Horse	15 Years	Female		STAR, STRIPE	None	None	None	LEFT	None	
24	0144	Sorrel	Saddlebred	16 Years	Neutered Male		STAR	None	None	FETLOCK	FETLOCK	FETLOCK	
25	0145	Sorrel	Saddlebred	14 Years	Neutered		BLAZE	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
September 6, 2016

Certificate Number
VS-PA-16-CA-006-00019029

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
					Male								
26	0146	Bay	Quarter Horse	16 Years	Female		None	None	PASTERN	PASTERN	None	None	
27	0147	Piebald	Paint	9 Years	Female		STAR SNIP	None	KNEE	KNEE	HIND QTR	HOCK	
28	0148	Skewbald	Paint	10 Years	Female		None	None	KNEE	KNEE	HOCK	HOCK	
29	0149	Skewbald	Paint	7 Years	Female		STAR	None	KNEE	LIGHT	HOCK	HOCK	
30	0150	Sorrel	Quarter Horse	4 Years	Male		STAR STRIPE SNIP	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue September 6, 2016	Certificate Number VS-PA-16-CA-006-00019029
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date September 6, 2016	Date September 6, 2016

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue September 6, 2016	Certificate Number VS-PA-16-CA-006-00019029
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1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE 94 HOOVER DR. JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: September 6, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	
***** ***** *****	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue September 6, 2016	Certificate Number VS-PA-16-CA-006-00019029
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21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0121	Bay	Quarter Horse	4 Years	Female		None	None	None	None	None	None	
2	0122	Bay	Quarter Horse	12 Years	Neutered Male		None	None	None	None	None	None	
3	0123	Bay	Saddlebred	16 Years	Female		STAR SNIP	None	None	None	None	None	
4	0124	Sorrel	Quarter Horse	7 Years	Female		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	None	
5	0125	Bay	Standardbred	20 Years	Neutered Male		None	None	None	None	CORONET	None	
6	0126	Sorrel	Mule	18 Years	Neutered Male		WHITE MUZZLE	None	None	None	None	None	
7	0127	BAY/WHITE	Paint	6 Years	Neutered Male		STAR STRIPE SNIP	None	LIGHT	LIGHT	HIND QTR	FETLOCK	
8	0128	Sorrel	Saddlebred	15 Years	Neutered Male		STAR STRIPE	None	None	None	CORONET	None	
9	0129	Sorrel	Quarter Horse	10 Years	Female		None	None	None	None	None	None	
10	0130	Bay	Quarter Horse	16 Years	Neutered Male		None	None	None	PASTERN	FETLOCK	FETLOCK	
11	0131	Palomino	Quarter Horse	20 Years	Neutered Male		STAR	None	None	PASTERN	PASTERN	PASTERN	
12	0132	Bay	Quarter Horse	12 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	FETLOCK	None	
13	0133	Black	Quarter Horse	7 Years	Female		BLAZE	None	None	PASTERN	None	FETLOCK	
14	0134	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	None	CORONET	None	
15	0135	Sorrel	Quarter Horse	6 Years	Female		STAR STRIPE SNIP	None	None	None	None	PASTERN	
16	0136	sorrel/ white	Paint	12 Years	Neutered Male		BLAZE	None	KNEE	KNEE	HIND QTR	HIND QTR	
17	0137	Sorrel	Quarter Horse	15 Years	Female		BLAZE	None	None	None	None	None	
18	0138	Sorrel	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	None	
19	0139	Bay	Quarter Horse	14 Years	Female		STAR STRIPE SNIP	None	None	None	FETLOCK	CORONET	
20	0140	Bay	Quarter Horse	16 Years	Neutered Male		None	None	None	None	PASTERN	CORONET	
21	0141	Sorrel	Saddlebred	14 Years	Neutered Male		STAR	None	None	None	None	None	
22	0142	BUCKSKIN	Quarter Horse	12 Years	Neutered Male		STAR	None	None	None	PASTERN	None	
23	0143	Sorrel	Quarter Horse	15 Years	Female		STAR, STRIPE	None	None	None	LEFT FETLOCK	None	
24	0144	Sorrel	Saddlebred	16 Years	Neutered Male		STAR	None	None	FETLOCK	FETLOCK	FETLOCK	
25	0145	Sorrel	Saddlebred	14 Years	Neutered		BLAZE	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
September 6, 2016

Certificate Number
VS-PA-16-CA-006-00019029

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
26	0146	Bay	Quarter Horse	16 Years	Female	Male	None	None	PASTERN	PASTERN	None	None	
27	0147	Piebald	Paint	9 Years	Female		STAR SNIP	None	KNEE	KNEE	HIND QTR	HOCK	
28	0148	Skewbald	Paint	10 Years	Female		None	None	KNEE	KNEE	HOCK	HOCK	
29	0149	Skewbald	Paint	7 Years	Female		STAR	None	KNEE	LIGHT	HOCK	HOCK	
30	0150	Sorrel	Quarter Horse	4 Years	Male		STAR STRIPE SNIP	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority	Date Of Issue	Certificate Number
UNITED STATES DEPARTMENT OF AGRICULTURE	September 6, 2016	VS-PA-16-CA-006-00019029

Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date September 6, 2016	Date September 6, 2016

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Sonestown Pa

VEHICLE LICENSE NO. AND DRIVER'S NAME

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

(b)(6)

STREET ADDRESS

517 Range St Soleil Est

CITY, STATE, ZIP CODE

Sonestown Pa 17038

CITY, STATE, ZIP CODE

St Andre - Auillin

AREA CODE & TELEPHONE NO.

(b)(6)

AREA CODE & TELEPHONE NO.

(b)(6)

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip.
 Foals are older than 6 months of age.

- Horses are able to bear weight on all 4 limbs.
 Horses are not blind in both eyes.
 Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	VSID 0121	X						X					X				
2	0122	X						X						X			
3	0123	X											X	X			
4	0124		X					X					X				
5	0125	X											X		X		
6	0126		X										X		X		
7	0127		X										X		X		
8	0128		X										X		X		
9	0129		X					X					X				
10	0130	X							X						X		
11	0131			X					X						X		
12	0132	X							X						X		
13	0133		X						X					X			
14	0134			X					X					X			
15	0135			X					X					X			

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS
(b) (6) CONVEYANCE.

SIGNATURE

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	1151D 0136				X						X					
17	1 0137					X			X			X				
18	0138					X			X							
19	0139 X							X			X					
20	0140 X							X						X		
21	0141					X					X			X		
22	0142					X		X						X		
23	0143					X			X			X				
24	0144					X						X			X	
25	0145					X					X				X	
26	0146 X							X				X				
27	0147					X						X		X		
28	0148					X						X		X		
29	0149					X						X		X		
30	0150					X		X						X		
31																
32																
33																
34																
35																
36																
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38																
39																
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43																
44																
45																

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER (Please print)
(b) (6) _____ I declare that the information contained in this form is true and correct to the best of my knowledge.)

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD

PO BOX 205 4698 YORK ROAD

NEW OXFORD, PA 17350

Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

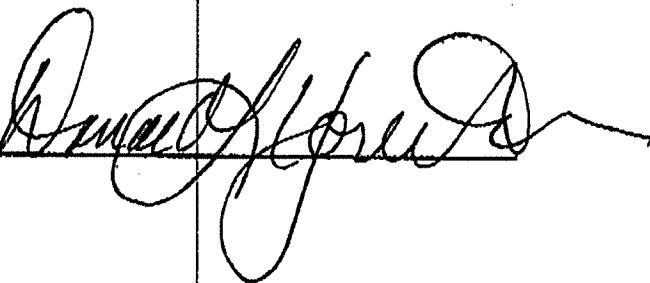
EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

19029, are accompanied with an Equine Information Document properly completed

and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian

Date of signature 9-6-16

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue September 13, 2016	Certificate Number VS-PA-16-CA-006-00019159
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1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: September 13, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	
***** ***** *****	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
September 13, 2016

Certificate Number
VS-PA-16-CA-006-00019159

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
					Male								
27	0177	Skewbald	Paint	5 Years	Female		BLAZE	None	WHITE LEG	WHITE LEG	HIND QTR	WHITE LEG	
28	0178	Skewbald	Paint	6 Years	Neutered Male		STAR	None	WHITE LEG	WHITE LEG	FETLOCK	FETLOCK	
29	0179	Bay	Standardbred	12 Years	Female		None	None	None	None	None	None	
30	0180	Skewbald	Paint	5 Years	Male	STAR STRIPE SNIP	None	KNEE	KNEE	HOCK	FETLOCK		

FB

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue September 13, 2016	Certificate Number VS-PA-16-CA-006-00019159
--	--	---

1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: September 13, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
September 13, 2016

Certificate Number
VS-PA-16-CA-006-00019159

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
					Male								
27	0177	Skewbald	Paint	5 Years	Female		BLAZE	None	WHITE LEG	WHITE LEG	HIND QTR	WHITE LEG	
28	0178	Skewbald	Paint	6 Years	Neutered Male		STAR	None	WHITE LEG	WHITE LEG	FETLOCK	FETLOCK	
29	0179	Bay	Standardbred	12 Years	Female		None	None	None	None	None	None	
30	0180	Skewbald	Paint	5 Years	Male	STAR STRIPE SNIP	None	KNEE	KNEE	HOCK		FETLOCK	

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD

PO BOX 205 4698 YORK ROAD

NEW OXFORD, PA 17350

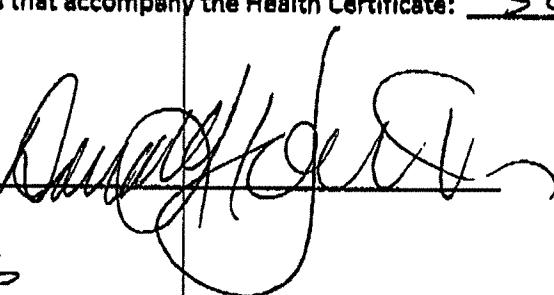
Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

19159, are accompanied with an Equine Information Document properly completed

and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian 

Date of signature 9-13-16

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE DATE CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

VEHICLE LICENSE NO. AND DRIVER'S NAME

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Sonestown PA 17638

CITY, STATE, ZIP CODE

AREA CODE & TELEPHONE NO.

AREA CODE & TELEPHONE NO.

(b)(6)

—

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	051				X			X					X				
2	052					X		X					X				
3	053				X			X					X				
4	054	X						X					X				
5	055		X										X		X		
6	056	X						X					X				
7	057		X					X					X				
8	058	X						X					X				
9	059	X						X						X			
10	060	X						X						X			
11	061		X										X	X			
12	062	X						X							X		
13	063			X				X					X				
14	064			X				X					X				
15	065			X				X							X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGN

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Gray	Blk.	Pinto	Chesn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	V5LD0166		X						X			X				
17	0167				X			X				X				
18	0168	X										X		X		
19	0169	X										X		X		
20	0170	X										X		X		
21	0171	X										X		X		
22	0172		X					X						X		
23	0173	X										X		X		
24	0174	X										X		X		
25	0175	X										X		X		
26	0176	X										X		X		
27	0177		X									X	X			
28	0178		X									X				
29	0179	X										X	X			
30	0180		X									X	X			
31																
32																
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(b) (6)

The information contained in this form is true and correct to the best of my knowledge.)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue September 20, 2016	Certificate Number VS-PA-16-CA-006-00019337
--	--	---

1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: September 20, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	
***** ***** *****	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
September 20, 2016

Certificate Number
VS-PA-16-CA-006-00019337

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0181	Bay	Quarter Horse	5 Years	Female		STAR	None	None	None	PASTERN	None	
2	0182	Bay	Quarter Horse	7 Years	Female		None	None	None	None	None	None	
3	0183	Bay	Quarter Horse	10 Years	Female		STAR, STRIPE	None	None	None	None	None	
4	0184	Sorrel	Quarter Horse	15 Years	Female		STAR STRIPE SNIP	None	None	None	FETLOCK	None	
5	0185	Black	Quarter Horse	12 Years	Female		STAR	None	None	None	PASTERN	CORONET	
6	0186	Skewbald	Paint	7 Years	Female		BLAZE	None	None	None	None	None	
7	0187	Bay	Quarter Horse	4 Years	Female		STAR	None	None	None	None	FETLOCK	
8	0188	Skewbald	Paint	12 Years	Female		STAR, STRIPE	None	KNEE	WHITE LEG	HOCK	None	
9	0189	Bay	Quarter Horse	5 Years	Female		STAR STRIPE SNIP	None	None	None	None	CORONET	
10	0190	Bay	Quarter Horse	10 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
11	0191	Skewbald	Paint	14 Years	Female		white face	None	FETLOCK	None	HOCK	HOCK	
12	0192	Bay	Quarter Horse	5 Years	Neutered Male		STAR	None	None	None	None	None	
13	0193	Skewbald	Paint	12 Years	Female		WHITE FACE	None	WHITE LEG	WHITE LEG	WHITE LEG	WHITE LEG	
14	0194	Bay	Quarter Horse	14 Years	Female		STAR	None	None	None	PASTERN	CORONET	
15	0195	Bay	Quarter Horse	12 Years	Female		None	None	None	None	None	None	
16	0196	Bay	Quarter Horse	15 Years	Female		None	None	None	None	None	None	
17	0197	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	None	None	PASTERN	
18	0198	Palomino	Quarter Horse	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
19	0199	Bay	Mule	16 Years	Neutered Male		None	None	None	None	None	None	
20	0200	Sorrel	Quarter Horse	9 Years	Neutered Male		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	FETLOCK	
21	0201	Bay	Quarter Horse	8 Years	Female		None	None	None	None	None	None	
22	0202	Sorrel	Standardbred	10 Years	Neutered Male		STAR	None	None	None	FETLOCK	FETLOCK	
23	0203	Black	Quarter Horse	14 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
24	0204	Bay	Standardbred	16 Years	Neutered Male		None	None	None	None	None	None	
25	0205	Bay	Quarter Horse	12 Years	Neutered Male		STAR, STRIPE	None	None	None	None	None	
26	0206	Sorrel	Quarter Horse	20 Years	Neutered Male		BLAZE	None	FETLOCK	FETLOCK	HOCK	HOCK	
27	0207	Bay	Quarter Horse	20 Years	Neutered Male		STAR	None	PASTERN	PASTERN	CORONET	None	
28	0208	Sorrel	Quarter Horse	15 Years	Female		STAR	None	None	None	None	FETLOCK	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
September 20, 2016

Certificate Number
VS-PA-16-CA-006-00019337

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
29	0209	Sorrel	Quarter Horse	7 Years	Neutered Male		BLAZE	None	None	None	PASTERN	FETLOCK	
30	0210	Sorrel	Quarter Horse	5 Years	Male		WHITE FACE	None	KNEE	KNEE	FETLOCK	FETLOCK	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue September 20, 2016	Certificate Number VS-PA-16-CA-006-00019337
--	--	---

Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

(Handwritten signature of Donald L. Yorlets, VMD)

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian <i>(Handwritten signature of F. D. Brown Jr. DVM)</i>
Date September 20, 2016	Date September 20, 2016

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue September 20, 2016	Certificate Number VS-PA-16-CA-006-00019337																														
<table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;">1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525</td> <td style="width: 50%; padding: 5px;">2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada</td> </tr> <tr> <td colspan="2" style="padding: 5px;">3. Country Of Origin: USA</td> </tr> <tr> <td colspan="2" style="padding: 5px;">5. Country Of Destination: Canada</td> </tr> <tr> <td colspan="2" style="padding: 5px;">7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038</td> </tr> <tr> <td colspan="2" style="padding: 5px;">9. Estimated Date Of Shipment: September 20, 2016</td> </tr> <tr> <td colspan="2" style="padding: 5px;">11. *****</td> </tr> <tr> <td colspan="2" style="padding: 5px;">13. Description Of Commodity: Horses</td> </tr> <tr> <td colspan="2" style="padding: 5px;">15. Total Quantity: 30</td> </tr> <tr> <td colspan="2" style="padding: 5px;">17. Total Number Of Packages/Containers: 1 Truck</td> </tr> <tr> <td colspan="2" style="padding: 5px;">18. Identification / Seal Numbers: *****</td> </tr> <tr> <td colspan="2" style="padding: 5px;">19. Commodities Intended Use: Immediate Slaughter</td> </tr> <tr> <td colspan="2" style="padding: 5px;">20. Type Of Admission: Permanent Import</td> </tr> <tr> <td colspan="3" style="padding: 5px;">21. Identification Of Commodities: (See next page)</td> </tr> <tr> <td colspan="3" style="height: 100px; vertical-align: top;">***** ***** *****</td> </tr> </table>			1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada	3. Country Of Origin: USA		5. Country Of Destination: Canada		7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038		9. Estimated Date Of Shipment: September 20, 2016		11. *****		13. Description Of Commodity: Horses		15. Total Quantity: 30		17. Total Number Of Packages/Containers: 1 Truck		18. Identification / Seal Numbers: *****		19. Commodities Intended Use: Immediate Slaughter		20. Type Of Admission: Permanent Import		21. Identification Of Commodities: (See next page)			***** ***** *****		
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**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
September 20, 2016

Certificate Number
VS-PA-16-CA-006-00019337

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0181	Bay	Quarter Horse	5 Years	Female		STAR	None	None	None	PASTERN	None	
2	0182	Bay	Quarter Horse	7 Years	Female		None	None	None	None	None	None	
3	0183	Bay	Quarter Horse	10 Years	Female		STAR, STRIPE	None	None	None	None	None	
4	0184	Sorrel	Quarter Horse	15 Years	Female		STAR STRIPE SNIP	None	None	None	FETLOCK	None	
5	0185	Black	Quarter Horse	12 Years	Female		STAR	None	None	None	PASTERN	CORONET	
6	0186	Skewbald	Paint	7 Years	Female		BLAZE	None	None	None	None	None	
7	0187	Bay	Quarter Horse	4 Years	Female		STAR	None	None	None	None	FETLOCK	
8	0188	Skewbald	Paint	12 Years	Female		STAR, STRIPE	None	KNEE	WHITE LEG	HOCK	None	
9	0189	Bay	Quarter Horse	5 Years	Female		STAR STRIPE SNIP	None	None	None	None	CORONET	
10	0190	Bay	Quarter Horse	10 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
11	0191	Skewbald	Paint	14 Years	Female		white face	None	FETLOCK	None	HOCK	HOCK	
12	0192	Bay	Quarter Horse	5 Years	Neutered Male		STAR	None	None	None	None	None	
13	0193	Skewbald	Paint	12 Years	Female		WHITE FACE	None	WHITE LEG	WHITE LEG	WHITE LEG	WHITE LEG	
14	0194	Bay	Quarter Horse	14 Years	Female		STAR	None	None	None	PASTERN	CORONET	
15	0195	Bay	Quarter Horse	12 Years	Female		None	None	None	None	None	None	
16	0196	Bay	Quarter Horse	15 Years	Female		None	None	None	None	None	None	
17	0197	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	None	None	PASTERN	
18	0198	Palomino	Quarter Horse	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
19	0199	Bay	Mule	16 Years	Neutered Male		None	None	None	None	None	None	
20	0200	Sorrel	Quarter Horse	9 Years	Neutered Male		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	FETLOCK	
21	0201	Bay	Quarter Horse	8 Years	Female		None	None	None	None	None	None	
22	0202	Sorrel	Standardbred	10 Years	Neutered Male		STAR	None	None	None	FETLOCK	FETLOCK	
23	0203	Black	Quarter Horse	14 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
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26	0206	Sorrel	Quarter Horse	20 Years	Neutered Male		BLAZE	None	FETLOCK	FETLOCK	HOCK	HOCK	
27	0207	Bay	Quarter Horse	20 Years	Neutered Male		STAR	None	PASTERN	PASTERN	CORONET	None	
28	0208	Sorrel	Quarter Horse	15 Years	Female		STAR	None	None	None	None	FETLOCK	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority

Date Of Issue

Certificate Number

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
29	0209	Sorrel	Quarter Horse	7 Years	Neutered Male		BLAZE	None	None	None	PASTERN	FETLOCK	
30	0210	Sorrel	Quarter Horse	5 Years	Male		WHITE FACE	None	KNEE	KNEE	FETLOCK	FETLOCK	

A large, semi-transparent watermark is positioned diagonally across the page, reading "COPY". A thick blue arrow originates from the top-left corner and points towards the center of the watermark.

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
September 20, 2016

Certificate Number
VS-PA-16-CA-006-00019337

Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
 - The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian
Donald L. Yorlets, VMD

Name of USDA Veterinarian

F. D. Brown Jr. DVM, VMO

Signature of Accredited Veterinarian
Electronically Signed

Signature of USDA Veterinarian

Date
September 20, 2016

Date
September 20, 2016

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD
PO BOX 205 4698 YORK ROAD
NEW OXFORD, PA 17350

Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

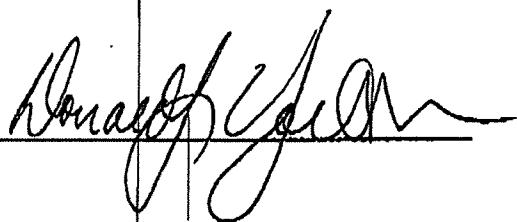
EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

19337, are accompanied with an Equine Information Document properly completed

and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian



Date of signature

9/20/16

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD
PO BOX 205 4698 YORK ROAD
NEW OXFORD, PA 17350

Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

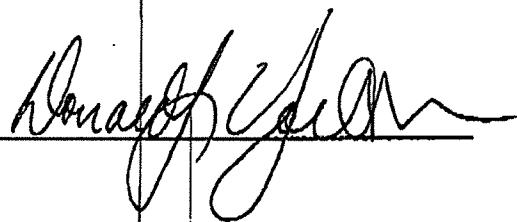
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Date of signature

9/20/16

CIRCLE Y VETERINARY SERVICES

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PO BOX 205 4698 YORK ROAD

NEW OXFORD, PA 17350

Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

EQUINE CERTIFICATION DOCUMENT

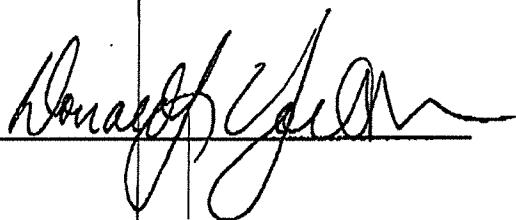
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19337

are accompanied with an Equine Information Document properly completed

and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian



Date of signature

9/20/16

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET
CONSIGNOR (OWNER/SHIPPER) NAME <i>Brian Moore</i>	CONSIGNEE (RECEIVER/DESTINATION) NAME <i>Les Viandes de la Petite Nation</i>	
STREET ADDRESS (b)(6)	STREET ADDRESS <i>517 Range St, Julie EST</i>	
CITY, STATE, ZIP CODE <i>Sonestown Pa 17038</i>	CITY, STATE, ZIP CODE <i>St. Andre - Avellin</i>	
AREA CODE & TELEPHONE NO. (b)(6)	AREA CODE & TELEPHONE NO.	

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0181	X							X				X				
2	0182	X							X				X				
3	0183	X							X				X				
4	0184			X					X				X				
5	0185		X						X				X				
6	0186		X									X	X				
7	0187	X							X				X				
8	0188		X									X	X				
9	0189	X							X				X				
10	0190	X							X						X		
11	0191		X									X	X				
12	0192	X							X						X		
13	0193		X									X	X				
14	0194	X							X				X				
15	0195	X							X				X				

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____

DATE _____

TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____

DATE _____

TIME _____

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chesin	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USLD 0196	X							X			X					
17	0197				X				X			X					
18	0198					X		X						X			
19	0199	X									X			X			
20	0200				X				X					X			
21	0201	X							X			X					
22	0202				X						X			X			
23	0203		X						X					X			
24	0204	X									X			X			
25	0205	X							X					X			
26	0206			X					X					X			
27	0207	X							X					X			
28	0208				X				X			X					
29	0209				X				X					X			
30	0210					X			X					X			
31																	
32																	
33																	
34																	
35																	
36																	
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44																	
45																	

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER (Please print)
(b) (6) _____ information contained in this form is true and correct to the best of my knowledge.)

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
VETERINARY SERVICES

UNITED STATES ORIGIN HEALTH CERTIFICATE

(This document does not replace Certificate of Inspection of Export Animals, VS Form 17-27)

4. DATE ISSUED <i>9-25-16</i>			5. U.S. PORT OF EMBARKATION (City and State) Jonestown, PA			6. STATE CODE 42			1. CONSIGNOR'S NAME (Last name, first name, middle initial or business name) MOORE, BRIAN S.						2. CERTIFICATE NO. L104498		3. PAGE NO. 1 OF 2							
9. SEMEN ("X" if yes) <input type="checkbox"/>			10. NO. DOSES OF SEMEN			11. TRANSPORTATION CLASS <input type="checkbox"/> 1 - Rail <input type="checkbox"/> 3 - Air <input checked="" type="checkbox"/> 2 - Truck <input type="checkbox"/> 4 - Ocean			7. CONSIGNOR'S STREET ADDRESS (Mailing Address) (b)(6)						8. CONSIGNOR'S CITY (or Town) Jonestown									
15. SPECIES ("X" one - use VS Form 17-6 for Poultry) <input type="checkbox"/> 01 BOVINE <input type="checkbox"/> 02 PORCINE <input type="checkbox"/> 03 OVINE <input type="checkbox"/> 04 CAPRINE <input checked="" type="checkbox"/> 05 EQUINE <input type="checkbox"/> 08 OTHER WILDLIFE - MAMMAL <input type="checkbox"/> 09 OTHER (Specify)			12. CONSIGNOR'S STATE Pennsylvania						13. STATE CODE 42		14. ZIP CODE 17038													
			16. CONSIGNEE'S NAME AND STREET ADDRESS (Mailing Address) Cavel Canada Export Inc. <i>LES VIANDES CAVEL</i> 517 Rang St. Julia St. (b)(6)						DESTINATION COUNTRY Quebec, Canada		ENTER CODE Canada													
			NEGATIVE TUBERCULIN READING			BRUCELLOSIS BLOOD SAMPLE COLLECTED			NEGATIVE RESULTS OF OTHER TESTS															
			<input type="checkbox"/> 48 HRS <input type="checkbox"/> 72 HRS			CERTIFIED BRUCELLOSIS FREE AREA			DISEASE			DISEASE			DISEASE									
												TYPE TEST			TYPE TEST			TYPE TEST						
If more lines are needed below - use VS Form 17-140A.			MODIFIED ACCREDITED AREA (TB) (Instructions for columns A, B, C & D on reverse)						ID NO. OR DESCRIPTION A		AGE B	SEX C	BREED D	✓ E	DATE F	✓ G	DATE H	VAC I	1/25 J	1/50 K	1/100 L	DATE M	DATE N	DATE O
17. FARM ORIGIN Owner's name (Last name, two initials, or business name) Owner's street address Owner's city/town, State code (FIPS code on reverse) & zip code																								
1. The animals were inspected by Donald L. Yorlets within 30 days prior to export and found to be healthy and free from evidence of communicable disease.																								
2. The animals were to the best of the knowledge and belief of Donald L. Yorlets, not exposed to any communicable disease within 60 days preceding the date of inspection; Either: a. The animal has resided in the United States or Canada since birth. OR b. The animal has met all of the import requirements of the United States of America and has resided in the United States for the past 60 days.																								
3. The animals at the time of inspection were found healthy and in a physical condition fit to be transported.																								
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.																								
5. During the previous twenty-one (21) days, the animals in this shipment have not been in the states of Texas, New Mexico Colorado, Nebraska or Arizona.																								
6. Fit to be transported means that on the day of inspection, no animal has an infirmity, illness, injury, or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.																								
7. All states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.																								

VALID ONLY IF USDA VETERINARY SEAL
APPEARS HERE



CERTIFICATION BY ISSUING VETERINARIAN

This is to certify that the animals identified above were inspected by me on this date and found to be free from evidence of communicable diseases and insofar as can be determined exposure thereto; the premises of origin are not under Federal or State quarantine because of animal disease; the animals were all negative to the tests shown on the dates indicated. Arrangements have been made for the animals to be handled in a transporting vehicle that has been cleaned and disinfected since last used for livestock and for movement to the port of embarkation without exposure to other animals en route, except those meeting these health requirements. The shipment must be accompanied to the port of export with this certificate.

19. DATE ENDORSED <i>9-27-16</i>	20. NAME OF ISSUING VETERINARIAN (Last name, first name, middle initial, - please print) <i>Donald L. Yorlets, V.M.D., Donald L.</i>	21. STATUS <input checked="" type="checkbox"/> 2 Federal <input type="checkbox"/> 1 State <input type="checkbox"/> 3 Accredited	22. TOTAL NO. OF ANIMALS (Certified for export or donated semen) (Include nos. from all attached VS Forms 17-140A) <i>30 horses</i>
23. Signature of Endorsing Federal Veterinarian <i>R.D. BROWN, Jr. V.M.D.</i>	24. NAME OF ENDORSING FEDERAL VET (Type, print, or stamp) <i>R.D. BROWN, Jr. V.M.D.</i>	25. SIGNATURE OF ISSUING VETERINARIAN <i>Donald L. Yorlets</i>	<i>LIC# BV005105 Acc# 059292</i>

READ INSTRUCTIONS FROM VS FORM 17-140

This certificate is authorized by law (21 USC 112), while you are not required to respond, no health certificate can be validated unless the data requested is provided. See reverse side for additional information. Form Approved OMB No. 0579-0020

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
VETERINARY SERVICES

CONTINUATION SHEET FOR

UNITED STATES ORIGIN HEALTH CERTIFICATE

17. FARM ORIGIN

Owner's name (Last name, two initials, & business name)
Owner's street address
Owner's city/town, state code & zip code

MOORE, BRIAN S. (b)(6) USLD JONESSTOWN PA 17038

1. FIRST CONSIGNOR'S NAME (last name, first name, middle initial or business name)

MOORE, BRIAN S.

16. CONSIGNEE'S NAME

LES VIANDES DE LA PETITE NATION

2. CERTIFICATE NO.
FROM VS FORM 17-140

3. PAGE NO.

L104498

2 of 2

NEGATIVE TUBERCULIN
READING 48 HRS. 72 HRS.BRUCELLOSIS BLOOD
SAMPLE COLLECTED

NEGATIVE RESULTS OF OTHER TESTS

DISEASE

DISEASE

DISEASE

MODIFIED ACCREDITED AREA (TB)

18. INDIVIDUAL IDENTIFICATION

✓

DATE

CERTIFIED BRUCELLOSIS
FREE AREA

TYPE TEST

TYPE TEST

TYPE TEST

✓

DATE

VAC

1/25

1/50

1/100

DATE

M

DATE

N

DATE

O

ID NO. OR
DESCRIPTION

A

B

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ID NO. OR
DESCRIPTION

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NO WHITE

STAR

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <i>Senestown Pa</i>
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET <i></i>
CONSIGNOR (OWNER/SHIPPER) NAME <i>Brian Moore</i> STREET ADDRESS (b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME <i>Les Viandes de la Pette Nation</i> STREET ADDRESS <i>517 Range St, Solice est</i>
CITY, STATE, ZIP CODE <i>Senestown Pa 17038</i> AREA CODE & TELEPHONE NO. (b)(6)		CITY, STATE, ZIP CODE <i>St Andre - Avellin</i> AREA CODE & TELEPHONE NO. <i></i>

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
1	VSLO 0211			X							X				X	
2	0212	X										X			X	
3	0213		X									X	X			
4	0214			X				X					X			
5	0215			X				X							X	
6	0216	X						X							X	
7	0217			X				X							X	
8	0218				X			X					X			
9	0219			X				X					X			
10	0220			X				X					X			
11	0221			X				X					X			
12	0222			X				X					X			
13	0223	X						X					X			
14	0224			X				X						X		
15	0225		X					X					X			

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE CONVEYANCE.
(b)(6)

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the(b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____

DATE _____

TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____

DATE _____

TIME _____

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	15100226				X			X				X				
17	0227					X			X					X		
18	0228					X			X			X				
19	0229				X			X					X			
20	0230 X							X			X					
21	0231 X							X				X				
22	0232	X						X			X					
23	0233 X							X			X					
24	0234 X							X				X				
25	0235 X							X				X				
26	0236	X								X		X				
27	0237 X									X	X					
28	0238		X					X					X			
29	0239 X									X		X				
30	0240 X									X		X				
31																
32																
33																
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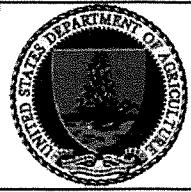
I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

(b) (6)

SIGNATURE

(on contained in this form is true and correct to the best of my knowledge.)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue October 4, 2016	Certificate Number VS-PA-17-CA-006-00019658
--	---	---

1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525		2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada	
3. Country Of Origin: USA		4. State Of Origin: Pennsylvania	
5. Country Of Destination: Canada		6. Zone Of Destination: *****	
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038		8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port	
9. Estimated Date Of Shipment: October 4, 2016		10. Means Of Transport: Truck	
11. *****		12. CITES Permit Number: *****	
13. Description Of Commodity: Horses		14. Date Of Inspection: *****	
15. Total Quantity: 30		16. Additional Information: *****	
17. Total Number Of Packages/Containers: 1 Truck			
18. Identification / Seal Numbers: *****			
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Admission: Permanent Import	
21. Identification Of Commodities: (See next page)			
***** ***** *****			

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 4, 2016

Certificate Number
VS-PA-17-CA-006-00019658

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0241	Sorrel	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
2	0242	Bay	Standardbred	16 Years	Neutered Male		None	None	None	None	None	None	
3	0243	Bay	Quarter Horse	16 Years	Neutered Male		STAR	None	None	None	PASTERN	PASTERN	
4	0244	Palomino	Quarter Horse	12 Years	Neutered Male		BLAZE	None	FETLOCK	FETLOCK	None	FETLOCK	
5	0245	Bay	Standardbred	14 Years	Neutered Male		None	None	None	None	None	None	
6	0246	Bay	Standardbred	12 Years	Neutered Male		None	None	None	None	CORONET	None	
7	0247	Bay	Quarter Horse	10 Years	Female		STAR	None	None	None	None	None	
8	0248	Black	Quarter Horse	8 Years	Neutered Male		None	None	None	None	PASTERN	CORONET	
9	0249	Bay	Quarter Horse	12 Years	Female		STAR STRIPE SNIP	None	None	CORONET	FETLOCK	FETLOCK	
10	0250	Sorrel	Tennessee Walking Horse	20 Years	Female		BLAZE	None	None	None	None	None	
11	0251	Bay	Quarter Horse	16 Years	Neutered Male		BLAZE	None	None	None	None	None	
12	0252	Bay	Quarter Horse	14 Years	Female		STAR STRIPE SNIP	None	None	None	None	None	
13	0253	Skewbald	Paint	10 Years	Neutered Male		STAR STRIPE SNIP	None	WHITE LEG	WHITE LEG	WHITE LEG	WHITE LEG	
14	0254	Sorrel	Standardbred	12 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
15	0255	Sorrel	Tennessee Walking Horse	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
16	0256	Bay	Quarter Horse	16 Years	Neutered Male		None	None	None	None	None	CORONET	
17	0257	Grey	Quarter Horse	8 Years	Female		STRIPE SNIP	None	PASTERN	None	PASTERN	None	
18	0258	Skewbald	Paint	5 Years	Female		STAR STRIPE SNIP	None	KNEE	KNEE	HOCK	HOCK	
19	0259	Skewbald	Paint	7 Years	Neutered Male		STAR STRIPE SNIP	None	KNEE	KNEE	FETLOCK	FETLOCK	
20	0260	Appaloosa	Appaloosa	9 Years	Male		BLAZE	None	None	None	PASTERN	PASTERN	
21	0261	Appaloosa	Appaloosa	5 Years	Female		STAR, STRIPE	None	None	None	None	None	
22	0262	Black	Quarter Horse	9 Years	Female		STAR	None	None	None	None	None	
23	0263	Bay	Standardbred	14 Years	Neutered Male		None	None	None	None	None	None	
24	0264	Bay	Standardbred	20 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	FETLOCK		

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 4, 2016

Certificate Number
VS-PA-17-CA-006-00019658

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
25	0265	Bay	Standardbred	15 Years	Neutered Male		STAR	None	CORONET	CORONET	None	None	
26	0266	Bay	Standardbred	12 Years	Neutered Male		STAR	None	None	None	None	None	
27	0267	Bay	Standardbred	14 Years	Neutered Male		STAR STRIPE	None	None	None	PASTERN	PASTERN	
28	0268	Skewbald	Paint	6 Years	Female		STAR STRIPE SNIP	None	KNEE	KNEE	HOCK	HOCK	
29	0269	Bay	Standardbred	12 Years	Neutered Male		STAR	None	None	None	None	None	
30	0270	Bay	Quarter Horse	16 Years	Female		None	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 4, 2016

Certificate Number
VS-PA-17-CA-006-00019658

Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date October 4, 2016	Date October 4, 2016

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority

UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue

October 4, 2016

Certificate Number

VS-PA-17-CA-006-00019658

1. Consignor:

BRIAN S. MOORE

(b)(6)

JONESTOWN, PA 17038

United States

Phone No. (b)(6)

Fax No. 717-865-2525

2. Consignee:

LES VIANDES DE LA PETITE NATION

517 RANG STE - JULIE EST

ST - ANDRE - AVELLIN, QUEBEC J0V 1W0

Canada

3. Country Of Origin:

USA

5. Country Of Destination:

Canada

7. Place Of Origin:

BRIAN S. MOORE

(b)(6)

JONESTOWN, PA 17038

4. State Of Origin:

Pennsylvania

6. Zone Of Destination:

9. Estimated Date Of Shipment:

October 4, 2016

10. Means Of Transport:

Truck

11. *****

12. CITES Permit Number:

13. Description Of Commodity:

Horses

15. Total Quantity:

30

14. Date Of Inspection:

17. Total Number Of Packages/Containers:

1 Truck

18. Identification / Seal Numbers:

16. Additional Information:

19. Commodities Intended Use:

Immediate Slaughter

20. Type Of Admission:

Permanent Import

21. Identification Of Commodities:

(See next page)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 4, 2016

Certificate Number
VS-PA-17-CA-006-00019658

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0241	Sorrel	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
2	0242	Bay	Standardbred	16 Years	Neutered Male		None	None	None	None	None	None	
3	0243	Bay	Quarter Horse	16 Years	Neutered Male		STAR	None	None	None	PASTERN	PASTERN	
4	0244	Palomino	Quarter Horse	12 Years	Neutered Male		BLAZE	None	FETLOCK	FETLOCK	None	FETLOCK	
5	0245	Bay	Standardbred	14 Years	Neutered Male		None	None	None	None	None	None	
6	0246	Bay	Standardbred	12 Years	Neutered Male		None	None	None	None	CORONET	None	
7	0247	Bay	Quarter Horse	10 Years	Female		STAR	None	None	None	None	None	
8	0248	Black	Quarter Horse	8 Years	Neutered Male		None	None	None	None	PASTERN	CORONET	
9	0249	Bay	Quarter Horse	12 Years	Female		STAR STRIPE SNIP	None	None	CORONET	FETLOCK	FETLOCK	
10	0250	Sorrel	Tennessee Walking Horse	20 Years	Female		BLAZE	None	None	None	None	None	
11	0251	Bay	Quarter Horse	16 Years	Neutered Male		BLAZE	None	None	None	None	None	
12	0252	Bay	Quarter Horse	14 Years	Female		STAR STRIPE SNIP	None	None	None	None	None	
13	0253	Skewbald	Paint	10 Years	Neutered Male		STAR STRIPE SNIP	None	WHITE LEG	WHITE LEG	WHITE LEG	WHITE LEG	
14	0254	Sorrel	Standardbred	12 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
15	0255	Sorrel	Tennessee Walking Horse	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
16	0256	Bay	Quarter Horse	16 Years	Neutered Male		None	None	None	None	None	CORONET	
17	0257	Grey	Quarter Horse	8 Years	Female		STRIPES SNIP	None	PASTERN	None	PASTERN	None	
18	0258	Skewbald	Paint	5 Years	Female		STAR STRIPE SNIP	None	KNEE	KNEE	HOCK	HOCK	
19	0259	Skewbald	Paint	7 Years	Neutered Male		STAR STRIPE SNIP	None	KNEE	KNEE	FETLOCK	FETLOCK	
20	0260	Appaloosa	Appaloosa	9 Years	Male		BLAZE	None	None	None	PASTERN	PASTERN	
21	0261	Appaloosa	Appaloosa	5 Years	Female		STAR, STRIPE	None	None	None	None	None	
22	0262	Black	Quarter Horse	9 Years	Female		STAR	None	None	None	None	None	
23	0263	Bay	Standardbred	14 Years	Neutered Male		None	None	None	None	None	None	
24	0264	Bay	Standardbred	20 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	FETLOCK		

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 4, 2016

Certificate Number
VS-PA-17-CA-006-00019658

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
25	0265	Bay	Standardbred	15 Years	Neutered Male		STAR	None	CORONET	CORONET	None	None	
26	0266	Bay	Standardbred	12 Years	Neutered Male		STAR	None	None	None	None	None	
27	0267	Bay	Standardbred	14 Years	Neutered Male		STAR STRIPE	None	None	None	PASTERN	PASTERN	
28	0268	Skewbald	Paint	6 Years	Female		STAR STRIPE SNIP	None	KNEE	KNEE	HOCK	HOCK	
29	0269	Bay	Standardbred	12 Years	Neutered Male		STAR	None	None	None	None	None	
30	0270	Bay	Quarter Horse	16 Years	Female		None	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue October 4, 2016	Certificate Number VS-PA-17-CA-006-00019658
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date October 4, 2016	Date October 4, 2016

**U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE**

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**

(Please type or print in ink)

FORM
APPROVED
OMB NO.
0579-0160

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip.
 Foals are older than 6 months of age.

Horses are able to bear weight on all 4 limbs.
 Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION					BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	151D0241				X				X				X				
2	0242	X										X			X		
3	0243	X							X						X		
4	0244					X	X								X		
5	0245	X										X			X		
6	0246	X									X				X		
7	0247	X						X				X					
8	0248		X						X						X		
9	0249	X							X				X				
10	0250			X					X	X			X				
11	0251	X							X						X		
12	0252	X							X				X				
13	0253		X									X			X		
14	0254		X								X				X		
15	0255		X					X							X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE
(b) (6) HOURS PRIOR TO THE TIME OF INSPECTION AND ARE IN A STATE OF NORMA
L ANCE.

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to
(b) (6))

CANADIAN FOOD INSPECTION AGENCY (CFIA)	
EST.	<hr/>
DATE	<hr/>
TIME	<hr/>
DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)	
EST.	<hr/>
DATE	<hr/>
TIME	<hr/>

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld	
16	VLD 0256	X						X							X	
17	1 0257		X					X							X	
18	0258			X								X	X			
19	0259			X								X		X		
20	0260				X							X		X		
21	0261				X							X	X			
22	0262		X				X					X				
23	0263	X										X		X		
24	0264	X										X		X		
25	0265	X										X		X		
26	0266	X										X		X		
27	0267	X										X		X		
28	0268		X									X	X			
29	0269	X										X		X		
30	0270	X					X					X				
31																
32																
33																
34																
35																
36																
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38																
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I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

(b) (6)

Information contained in this form is true and correct to the best of my knowledge.)

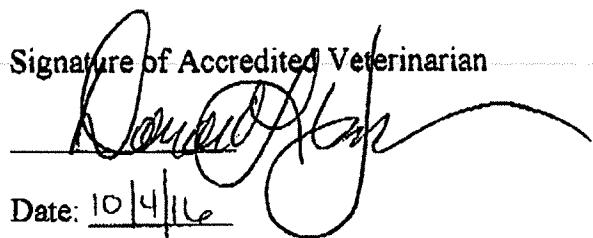
EQUINE CERTIFICATION DOCUMENT

Donald Yorlets, VMD
Circle Y Vet Services
4698 York Rd
Po Box 205
New Oxford, PA 17350
Tel: 717-873-7401 cell
Fax: 717-624-7610 fax

I DONALD L. YORLETS, VMD, (an accredited veterinarian) have verified that all equine included on the Export Health Certificate number: 19458 (number of Export Health Certificate), are accompanied with an Equine Information Document properly completed and signed by the owner.

Number of EIDs that accompany the Health Certificate: 30 (the total number of EIDs)

Signature of Accredited Veterinarian



Date: 10/4/16

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue October 18, 2016	Certificate Number VS-PA-17-CA-006-00019905
--	--	---

1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: October 18, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import

21. Identification Of Commodities:

(See next page)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 18, 2016

Certificate Number
VS-PA-17-CA-006-00019905

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0271	Black	Quarter Horse	12 Years	Female		STAR	None	None	None	None	None	
2	0272	Bay	Quarter Horse	6 Years	Neutered Male		STAR	None	None	None	None	CORONET	
3	0273	Bay	Quarter Horse	8 Years	Neutered Male		STAR, STRIPE	None	None	None	None	FETLOCK	
4	0274	Bay	Quarter Horse	14 Years	Female		None	None	None	None	None	CORONET	
5	0275	Sorrel	Saddlebred	12 Years	Female		BLAZE	None	None	None	FETLOCK	FETLOCK	
6	0276	Bay	Standardbred	10 Years	Neutered Male		None	None	None	None	None	None	
7	0277	Appaloosa	Appaloosa	16 Years	Neutered Male		BLAZE	None	None	None	None	None	
8	0278	Sorrel	Saddlebred	12 Years	Neutered Male		STRIPE SNIP	None	None	None	None	PASTERN	
9	0279	Skewbald	Paint	11 Years	Female		STAR SNIP	None	KNEE	KNEE	HOCK	HOCK	
10	0280	Skewbald	Paint	16 Years	Female		STRIPE SNIP	None	KNEE	KNEE	HOCK	HOCK	
11	0281	Sorrel	Quarter Horse	10 Years	Neutered Male		BLAZE	None	None	None	None	None	
12	0282	Black	Standardbred	20 Years	Female		STAR	None	None	None	None	None	
13	0283	Skewbald	Paint	5 Years	Female		BLAZE	None	WHITE LEG	WHITE LEG	HIND QTR	HIND QTR	
14	0284	Sorrel	Quarter Horse	12 Years	Female		STAR STRIPE SNIP	None	None	None	None	None	
15	0285	Sorrel	Mule	20 Years	Female		None	None	None	None	None	None	
16	0286	Appaloosa	Appaloosa	4 Years	Neutered Male		STAR, STRIPE	None	None	None	None	None	
17	0287	Sorrel	Quarter Horse	20 Years	Female		STAR STRIPE SNIP	None	None	None	None	None	
18	0288	Palomino	Quarter Horse	10 Years	Male		STAR	None	None	None	None	None	
19	0289	Appaloosa	Appaloosa	8 Years	Neutered Male		STAR SNIP	None	None	None	None	None	
20	0290	Bay	Standardbred	13 Years	Neutered Male		None	None	None	None	PASTERN	PASTERN	
21	0291	Bay	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	None	
22	0292	Black	Standardbred	14 Years	Neutered Male		STAR	None	None	None	None	PASTERN	
23	0293	Bay	Standardbred	16 Years	Female		BLAZE	None	None	None	None	FETLOCK	
24	0294	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	FETLOCK	FETLOCK	None	
25	0295	Skewbald	Paint	20 Years	Neutered Male		STAR STRIPE SNIP	None	KNEE	KNEE	HOCK	HOCK	
26	0296	Bay	Standardbred	12 Years	Neutered Male		STAR	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority

Date Of Issue

Certificate Number

21. Identification Of Commodities: Continued

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue October 18, 2016	Certificate Number VS-PA-17-CA-006-00019905
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
 - The animals have met all of the import requirements of the United States of America and have resided in the United States for the past 60 days.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date October 18, 2016	Date October 18, 2016

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD

PO BOX 205 4698 YORK ROAD

NEW OXFORD, PA 17350

Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

19905 are accompanied with an Equine Information Document properly completed
and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian

Donald L. YorletsDate of signature 10/18/16

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE DATE CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Jonestown Pa 17058

AREA CODE & TELEPHONE NO.

(b)(6)

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

517 Rang St Julie EST

CITY, STATE, ZIP CODE

St Andre-Avelin

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stall	Geld	
1	VSLD 0271		X					X				X				
2	0272	X						X						X		
3	0273	X						X						X		
4	0274	X						X				X				
5	0275		X									X	X			
6	0276	X										X		X		
7	0277			X								X		X		
8	0278		X									X		X		
9	0279		X									X	X			
10	0280		X									X	X			
11	0281			X				X						X		
12	0282	X										X	X			
13	0283		X									X	X			
14	0284			X				X					X			
15	0285			X								X	X			

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to
(b) (6))

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____

DATE _____

TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____

DATE _____

TIME _____

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	151D0286					X					X				X		
17	1 0287					X			X				X				
18	0288					X			X				X				
19	0289					X					X			X			
20	0290 X										X			X			
21	0291 X							X					X				
22	0292			X							X			X			
23	0293 X					X						X	X				
24	0294				X			X					X				
25	0295			X							X			X			
26	0296 X										X			X			
27	0297 X										X	X		X			
28	0298				X			X				X		X			
29	0299 X										X			X			
30	0300 X										X	X					
31																	
32																	
33																	
34																	
35																	
36																	
37																	
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I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER/I certify that the information contained in this form is true and correct to the best of my knowledge.)
(b) (6)

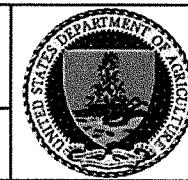
**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue October 31, 2016	Certificate Number VS-PA-17-CA-006-00020165
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1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: October 31, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 31, 2016

Certificate Number
VS-PA-17-CA-006-00020165

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0301	Bay	Quarter Horse	18 Years	Neutered Male		STAR STRIPE SNIP	None	CORONET	None	None	None	
2	0302	Sorrel	Quarter Horse	16 Years	Neutered Male		BLAZE	None	None	None	FETLOCK	FETLOCK	
3	0303	Sorrel	Quarter Horse	20 Years	Neutered Male		None	None	None	None	None	None	
4	0304	Bay	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
5	0305	Sorrel	Saddlebred	14 Years	Female		STAR	None	None	None	PASTERN	None	
6	0306	Skewbald	Paint	12 Years	Female		white face	None	CORONET	KNEE	FETLOCK	CORONET	
7	0307	Sorrel	Quarter Horse	9 Years	Neutered Male		BLAZE	None	CORONET	FETLOCK	FETLOCK	None	
8	0308	Bay	Quarter Horse	11 Years	Female		BLAZE	None	None	PASTERN	FETLOCK	FETLOCK	
9	0309	Sorrel	Mule	20 Years	Neutered Male		WHITE MUZZLE	None	None	None	None	None	
10	0310	Sorrel	Quarter Horse	14 Years	Female		None	None	None	None	None	None	
11	0311	Black	Quarter Horse	12 Years	Female		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	FETLOCK	
12	0312	Sorrel	Belgian	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
13	0313	Sorrel	Mule	16 Years	Neutered Male		STAR WHITE MUZZLE	None	None	None	None	None	
14	0314	Sorrel	Quarter Horse	14 Years	Neutered Male		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	FETLOCK	
15	0315	Sorrel	Standardbred	12 Years	Neutered Male		BLAZE	None	FETLOCK	None	FETLOCK	FETLOCK	
16	0316	Bay	Quarter Horse	15 Years	Female		STAR	None	None	None	FETLOCK	FETLOCK	
17	0317	Sorrel	Belgian	20 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
18	0318	Sorrel	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
19	0319	Bay	Quarter Horse	12 Years	Neutered Male		STAR	None	None	None	None	None	
20	0320	Sorrel	Quarter Horse	16 Years	Neutered Male		STAR, STRIPE	None	None	None	FETLOCK	FETLOCK	
21	0321	Bay	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	None	
22	0322	Bay	Standardbred	14 Years	Neutered Male		STAR	None	None	None	None	PASTERN	
23	0323	Bay	Quarter Horse	16 Years	Neutered Male		None	None	None	None	None	None	
24	0324	Bay	Standardbred	12 Years	Neutered		None	None	None	None	None	PASTERN	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 31, 2016

Certificate Number
VS-PA-17-CA-006-00020165

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
					Male								
25	0325	Bay	Quarter Horse	10 Years	Female		None	None	None	FETLOCK	PASTERN		
26	0326	Bay	Quarter Horse	9 Years	Neutered Male		STAR	None	PASTERN	PASTERN	PASTERN	CORONET	
27	0327	Bay	Quarter Horse	6 Years	Male		None	None	None	PASTERN	PASTERN		
28	0328	Bay	Standardbred	12 Years	Female		STAR	None	None	None	None		
29	0329	Black	Quarter Horse	11 Years	Female		BLAZE	None	None	None	FETLOCK	FETLOCK	ONE EYE
30	0330	Sorrel	Quarter Horse	14 Years	Male		BLAZE	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 31, 2016

Certificate Number
VS-PA-17-CA-006-00020165

Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian
Donald L. Yorlets, VMD

Signature of Accredited Veterinarian
Electronically Signed

Date
October 31, 2016

Name of USDA Veterinarian

F. D. Brown Jr. DVM, VMO

Signature of USDA Veterinarian

Date
October 31, 2016

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 31, 2016

Certificate Number
VS-PA-17-CA-006-00020165

1. Consignor:
BRIAN S. MOORE
(b)(6)
JONESTOWN, PA 17038
United States
Phone No. (b)(6)
Fax No. 717-565-2525

2. Consignee:
LES VIANDES DE LA PETITE NATION
517 RANG STE - JULIE EST
ST - ANDRE - AVELLIN, QUEBEC J0V 1W0
Canada

3. Country Of Origin:
USA

4. State Of Origin:
Pennsylvania

5. Country Of Destination:
Canada

6. Zone Of Destination:

7. Place Of Origin:
BRIAN S. MOORE
(b)(6)
JONESTOWN, PA 17038

8. Port Of Embarkation / Border Crossing:
NY - Champlain - Border Port

9. Estimated Date Of Shipment:
October 31, 2016

10. Means Of Transport:
Truck

12. CITES Permit Number:

13. Description Of Commodity:
Horses

14. Date Of Inspection:

15. Total Quantity:
30

16. Additional Information:

17. Total Number Of Packages/Containers:
1 Truck

18. Identification / Seal Numbers:

19. Commodities Intended Use:
Immediate Slaughter

20. Type Of Admission:
Permanent Import

21. Identification Of Commodities:

(See next page)

COPY

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 31, 2016

Certificate Number
VS-PA-17-CA-006-00020165

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0301	Bay	Quarter Horse	18 Years	Neutered Male		STAR STRIPE SNIP	None	CORONET	None	None	None	
2	0302	Sorrel	Quarter Horse	16 Years	Neutered Male		BLAZE	None	None	None	FETLOCK	FETLOCK	
3	0303	Sorrel	Quarter Horse	20 Years	Neutered Male		None	None	None	None	None	None	
4	0304	Bay	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
5	0305	Sorrel	Saddlebred	14 Years	Female		STAR	None	None	None	PASTERN	None	
6	0306	Skewbald	Paint	12 Years	Female		white face	None	CORONET	KNEE	FETLOCK	CORONET	
7	0307	Sorrel	Quarter Horse	9 Years	Neutered Male		BLAZE	None	CORONET	FETLOCK	FETLOCK	None	
8	0308	Bay	Quarter Horse	11 Years	Female		BLAZE	None	None	PASTERN	FETLOCK	FETLOCK	
9	0309	Sorrel	Mule	20 Years	Neutered Male		WHITE MUZZLE	None	None	None	None	None	
10	0310	Sorrel	Quarter Horse	14 Years	Female		None	None	None	None	None	None	
11	0311	Black	Quarter Horse	12 Years	Female		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	FETLOCK	
12	0312	Sorrel	Belgian	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
13	0313	Sorrel	Mule	16 Years	Neutered Male		STAR WHITE MUZZLE	None	None	None	None	None	
14	0314	Sorrel	Quarter Horse	14 Years	Neutered Male		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	FETLOCK	
15	0315	Sorrel	Standardbred	12 Years	Neutered Male		BLAZE	None	FETLOCK	None	FETLOCK	FETLOCK	
16	0316	Bay	Quarter Horse	15 Years	Female		STAR	None	None	None	FETLOCK	FETLOCK	
17	0317	Sorrel	Belgian	20 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
18	0318	Sorrel	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
19	0319	Bay	Quarter Horse	12 Years	Neutered Male		STAR	None	None	None	None	None	
20	0320	Sorrel	Quarter Horse	16 Years	Neutered Male		STAR, STRIPE	None	None	None	FETLOCK	FETLOCK	
21	0321	Bay	Quarter Horse	10 Years	Neutered Male		STAR	None	None	None	None	None	
22	0322	Bay	Standardbred	14 Years	Neutered Male		STAR	None	None	None	None	PASTERN	
23	0323	Bay	Quarter Horse	16 Years	Neutered Male		None	None	None	None	None	None	
24	0324	Bay	Standardbred	12 Years	Neutered		None	None	None	None	None	PASTERN	

COPY

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
October 31, 2016

Certificate Number
VS-PA-17-CA-006-00020165

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
25	0325	Bay	Quarter Horse	10 Years	Male		None	None	None	FETLOCK	PASTERN		
26	0326	Bay	Quarter Horse	9 Years	Female		STAR	None	PASTERN	PASTERN	CORONET		
27	0327	Bay	Quarter Horse	6 Years	Neutered Male		None	None	CORONET	PASTERN	PASTERN		
28	0328	Bay	Standardbred	12 Years	Male		STAR	None	None	None	None		
29	0329	Black	Quarter Horse	11 Years	Female		BLAZE	None	None	None	FETLOCK	FETLOCK	ONE EYE
30	0330	Sorrel	Quarter Horse	14 Years	Male		BLAZE	None	None	None	None	None	

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**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue October 31, 2016	Certificate Number VS-PA-17-CA-006-00020165
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date October 31, 2016	Date October 31, 2016

COPY

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Eric Moore PA

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Jonestown PA 17038

AREA CODE & TELEPHONE NO.

(b)(6)

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Yades oie la Petite Nation

STREET ADDRESS

517 Range St. Julie EST

CITY, STATE, ZIP CODE

St Andrea - Ave 111n

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0301	X						X							X		
2	0302				X			X							X		
3	0303				X			X							X		
4	0304	X						X							X		
5	0305				X										XX		
6	0306		X												XX		
7	0307			X				X							X		
8	0308	X						X							X		
9	0309			X											X		
10	0310			X				X							X		
11	0311		X					X							X		
12	0312			X				X							X		
13	0313			X											X		
14	0314			X				X							X		
15	0315			X											X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGNATURE

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USLD 1316X								X			X					
17	1317				X					X					X		
18	0318			X					X			X					
19	0319X								X						X		
20	0320			X					X						X		
21	0321X							X							X		
22	0322X										X				X		
23	0323X								X						X		
24	0324X										X				X		
25	0325X								X			X					
26	0326X								X						X		
27	0327X								X			X					
28	0328X										X	X					
29	0329		X						X			X					
30	0330			X					X			X					
31																	
32																	
33																	
34																	
35																	
36																	
37																	
38																	
39																	
40																	
41																	
42																	
43																	
44																	
45																	

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER/(I certify that the information contained in this form is true and correct to the best of my knowledge.)
(b) (6)

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD

PO BOX 205 4698 YORK ROAD

NEW OXFORD, PA 17350

Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

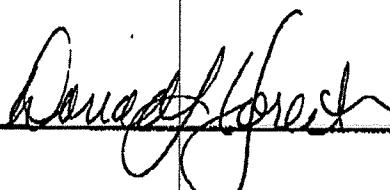
EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

20165 are accompanied with an Equine Information Document properly completed

and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian

Date of signature 10/31/16

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority

UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue

November 2, 2016

Certificate Number

VS-PA-17-CA-006-00020204

1. Consignor:

BRIAN S. MOORE

(b)(6)

JONESTOWN, PA 17038

United States

Phone No. (b)(6)

Fax No. 717-865-2525

2. Consignee:

LES VIANDES DE LA PETITE NATION

517 RANG STE - JULIE EST

ST - ANDRE - AVELLIN, QUEBEC J0V 1W0

Canada

3. Country Of Origin:

USA

4. State Of Origin:

Pennsylvania

5. Country Of Destination:

Canada

6. Zone Of Destination:

7. Place Of Origin:

BRIAN S. MOORE

(b)(6)

JONESTOWN, PA 17038

8. Port Of Embarkation / Border Crossing:

NY - Champlain - Border Port

9. Estimated Date Of Shipment:

November 2, 2016

10. Means Of Transport:

Truck

11. *****

12. CITES Permit Number:

13. Description Of Commodity:

Horses

14. Date Of Inspection:

15. Total Quantity:

30

16. Additional Information:

17. Total Number Of Packages/Containers:

1 Truck

18. Identification / Seal Numbers:

19. Commodities Intended Use:

Immediate Slaughter

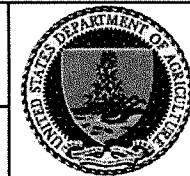
20. Type Of Admission:

Permanent Import

21. Identification Of Commodities:

(See next page)

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
November 2, 2016

Certificate Number
VS-PA-17-CA-006-00020204

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0331	Piebald	Paint	12 Years	Neutered Male		WHITE FACE	None	WHITE LEG	WHITE LEG	WHITE LEG	WHITE LEG	
2	0332	Bay	Quarter Horse	7 Years	Female		None	None	None	None	None	None	
3	0333	Bay	Quarter Horse	14 Years	Neutered Male		STAR SNIP	None	None	None	None	None	
4	0334	Black	Quarter Horse	9 Years	Female		STAR FEW HAIRS	None	None	None	None	None	
5	0335	Bay	Standardbred	16 Years	Neutered Male		STAR	None	None	None	None	None	
6	0336	Bay	Standardbred	14 Years	Neutered Male		STAR FEW HAIRS	None	None	None	CORONET	None	
7	0337	Bay	Standardbred	12 Years	Neutered Male		STAR	None	None	None	None	None	
8	0338	Sorrel	Quarter Horse	8 Years	Female		STAR	None	None	None	None	None	
9	0339	Sorrel	Tennessee Walking Horse	18 Years	Neutered Male		BLAZE	None	None	None	None	None	
10	0340	Bay	Standardbred	15 Years	Neutered Male		STAR	None	None	None	None	None	
11	0341	Bay	Quarter Horse	10 Years	Female		STAR	None	None	CORONET	FETLOCK	None	
12	0342	Bay	Quarter Horse	12 Years	Female		STAR STRIPE SNIP	None	None	None	None	CORONET	
13	0343	Sorrel	Quarter Horse	9 Years	Neutered Male		BLAZE	None	None	FETLOCK	FETLOCK	FETLOCK	
14	0344	Bay	Standardbred	14 Years	Neutered Male		None	None	None	None	PASTERN	PASTERN	
15	0345	Bay	Quarter Horse	16 Years	Neutered Male		STAR FEW HAIRS	None	None	None	None	CORONET	
16	0346	Bay	Standardbred	18 Years	Neutered Male		None	None	None	None	None	None	
17	0347	Black	Quarter Horse	15 Years	Neutered Male		STAR	None	None	None	None	None	
18	0348	Sorrel	Quarter Horse	20 Years	Neutered Male		BLAZE	None	CORONET	None	None	FETLOCK	
19	0349	Bay	Quarter Horse	3 Years	Neutered Male		STAR	None	None	None	PASTERN	None	
20	0350	Bay	Standardbred	14 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
21	0351	Piebald	Paint	12 Years	Female		STAR STRIPE SNIP	None	KNEE	KNEE	HOCK	HOCK	
22	0352	Bay	Quarter Horse	10 Years	Neutered Male		None	None	None	None	None	None	
23	0353	Bay	Standardbred	9 Years	Neutered Male		None	None	None	None	CORONET	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue November 2, 2016	Certificate Number VS-PA-17-CA-006-00020204
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

(Handwritten signature of Donald L. Yorlets, VMD)

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian <i>(Handwritten signature of F. D. Brown Jr. DVM)</i>
Date November 2, 2016	Date November 2, 2016

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
November 2, 2016

Certificate Number
VS-PA-17-CA-006-00020204

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
24	0354	Sorrel	Quarter Horse	7 Years	Female		None	None	None	None	None	None	
25	0355	Bay	Quarter Horse	20 Years	Neutered Male		STAR STRIPE SNIP	None	PASTERN	PASTERN	None	None	
26	0356	Bay	Standardbred	15 Years	Neutered Male		STAR	None	None	None	None	None	
27	0357	Sorrel	Tennessee Walking Horse	10 Years	Neutered Male		BLAZE	None	None	None	HOCK	HOCK	
28	0358	Bay	Standardbred	12 Years	Neutered Male		None	None	None	None	None	None	
29	0359	Bay	Quarter Horse	16 Years	Female		STAR	None	None	CORONET	PASTERN	None	
30	0360	Sorrel	Tennessee Walking Horse	20 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE DATE CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

VEHICLE LICENSE NO. AND DRIVER'S NAME

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Brian Moore

STREET ADDRESS

(b)(6)

CITY, STATE, ZIP CODE

Sonestown Pa 17038

AREA CODE & TELEPHONE NO

(b)(6)

CONSIGNEE (RECEIVER/DESTINATION) NAME

Les Viandes de la Petite Nation

STREET ADDRESS

517 Range St Joliette

CITY, STATE, ZIP CODE

St Andre - Auillin

AREA CODE & TELEPHONE NO.

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

Pregnant mares are not likely to foal (give birth) during the trip.

Horses are able to bear weight on all 4 limbs.

Foals are older than 6 months of age.

Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	U2D 0331			X								X			X		
2	0332	X							X				X				
3	0333	X							X					X			
4	0334		X						X				X				
5	0335	X										X			X		
6	0336	X										X			X		
7	0337	X										X			X		
8	0338		X						X				X				
9	0339		X							X				X			
10	0340	X										X			X		
11	0341	X							X				X				
12	0342	X							X				X				
13	0343		X						X					X			
14	0344	X										X			X		
15	0345	X							X					X			

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGNATURE

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____

DATE _____

TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____

DATE _____

TIME _____

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	131D 0346	X									X					X	
17	0347		X						X							X	
18	0348			X					X							X	
19	0349	X							X							X	
20	0350	X														X	
21	0351			X								X	X			X	
22	0352	X						X								X	
23	0353	X									X					X	
24	0354			X				X				X				X	
25	0355	X						X								X	
26	0356	X									X					X	
27	0357			X				X								X	
28	0358	X									X					X	
29	0359	X						X				X				X	
30	0360			X				X								X	
31																	
32																	
33																	
34																	
35																	
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I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER/(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICES
STATEMENT OF SERVICES

Originating Office Phone

(b)(6)

Control Number: 01421700239

Office Id: APVSIC0142

Brian Moore

(b)(6)

Jonestown

PA 17038

Service Date(s)

Begin: 02-NOV-16

End: 02-NOV-16

Reference NR: 20204

Code Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101 Slaughter Animals To Can Or Mx	7XVSIC0142VSIMPEXPTIC0142	56.00	1.00	56.00

Total Due \$ 56.00

Remarks: 20204

Nfc Id

Payment Information

Date	Amount	Payment Type	Account/Check #
02-NOV-16	\$ 56.00	Check	7241

Attention: Customers with government credit accounts - A consolidated monthly bill will be issued by the USDA, APHIS (signature accepting payment terms is on file). Upon receipt of the monthly bill, mail your payment to: USDA/APHIS, P.O. Box 979039 St. Louis, MO 63197-9000.

Notice to Payer: If payment of this Statement of Service is something other than cash or a US postal Money Order, the Statement of Service will not be considered paid in full until such tender has been cleared. If you have any questions, please contact the originating office listed above.

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue November 29, 2016	Certificate Number VS-PA-17-CA-006-00020794
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1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: November 29, 2016	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
November 29, 2016

Certificate Number
VS-PA-17-CA-006-00020794

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0361	Piebald	Paint	10 Years	Female		BLAZE	None	KNEE	KNEE	HOCK	HOCK	
2	0362	Chestnut	Saddlebred	14 Years	Female		STAR	None	None	None	PASTERN	FETLOCK	
3	0363	Sorrel	Saddlebred	10 Years	Neutered Male		BLAZE	None	None	None	FETLOCK	None	
4	0364	Black	Standardbred	12 Years	Neutered Male		STAR	None	None	None	None	None	
5	0365	Bay	Standardbred	15 Years	Female		STAR	None	None	None	PASTERN	None	
6	0366	Bay	Standardbred	12 Years	Female		STAR, STRIPE	None	PASTERN	None	FETLOCK	FETLOCK	
7	0367	Bay	Standardbred	10 Years	Female		None	None	None	None	None	None	
8	0368	Bay	Quarter Horse	16 Years	Neutered Male		None	None	None	None	None	None	
9	0369	Dun	Quarter Horse	8 Years	Female		BLAZE	None	None	None	None	PASTERN	
10	0370	Bay	Standardbred	15 Years	Neutered Male		SNIP	None	None	None	FETLOCK	None	
11	0371	Bay	Quarter Horse	6 Years	Female		BLAZE	None	None	None	None	PASTERN	
12	0372	Sorrel	Quarter Horse	18 Years	Neutered Male		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	FETLOCK	
13	0373	Sorrel	Saddlebred	10 Years	Female		STAR STRIPE SNIP	None	None	None	None	None	
14	0374	Bay	Standardbred	14 Years	Female		None	None	None	None	None	None	
15	0375	Sorrel	Saddlebred	17 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	FETLOCK	None	
16	0376	Sorrel	Quarter Horse	12 Years	Neutered Male		BLAZE	None	None	None	None	None	
17	0377	Bay	Standardbred	10 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	FETLOCK	PASTERN	
18	0378	Bay	Standardbred	16 Years	Female		STAR	None	None	PASTERN	FETLOCK	PASTERN	
19	0379	Bay	Standardbred	14 Years	Neutered Male		STAR	None	None	None	None	None	
20	0380	Black	Quarter Horse	7 Years	Female		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	FETLOCK	
21	0381	Bay	Quarter Horse	10 Years	Neutered Male		None	None	None	None	PASTERN	None	
22	0382	Bay	Standardbred	12 Years	Neutered Male		None	None	None	None	None	None	
23	0383	Bay	Standardbred	15 Years	Neutered Male		None	None	None	None	None	None	
24	0384	Bay	Standardbred	12 Years	Female		None	None	None	None	CORONET	PASTERN	
25	0385	Bay	Standardbred	10 Years	Neutered Male		STAR	None	None	None	None	None	
26	0386	Bay	Standardbred	14 Years	Neutered		ST	None	None	None	None	PASTERN	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
November 29, 2016

Certificate Number
VS-PA-17-CA-006-00020794

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
27	0387	Sorrel	Saddlebred	9 Years	Neutered Male	Male	STAR	None	PASTERN	None	FETLOCK	None	
28	0388	Bay	Standardbred	18 Years	Neutered Male		None	None	None	None	None	None	
29	0389	Sorrel	Quarter Horse	12 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	PASTERN	PASTERN	
30	0390	Bay	Standardbred	16 Years	Neutered Male		None	None	None	None	None	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue November 29, 2016	Certificate Number VS-PA-17-CA-006-00020794
--	---	---

Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date November 29, 2016	Date November 29, 2016

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD

PO BOX 205 4698 YORK ROAD

NEW OXFORD, PA 17350

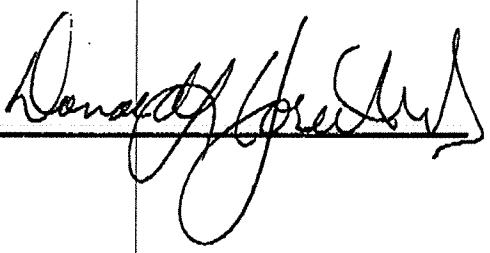
Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

20794

are accompanied with an Equine Information Document properly completed and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian Date of signature 11/29/16

OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <i>Somestown Pa</i>
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET <u> </u>
CONSIGNOR (OWNER/SHIPPER) NAME <i>Brian Moore</i> (b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME <i>Les Viandes de la Petite Nation</i> STREET ADDRESS <i>517 Range St Julie Est</i>
CITY, STATE, ZIP CODE <i>Somestown Pa 17038</i>		CITY, STATE, ZIP CODE <i>St Andre Avellin</i>
AREA CODE & TELEPHONE NO (b)(6)		AREA CODE & TELEPHONE NO <u> </u>

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	VSLD0361			X								X	X				
2	0362				X							X	X				
3	0363				X							X		X			
4	0364	X										X		X			
5	0365 X											X	X				
6	0366 X											X	X				
7	0367 X											X	X				
8	0368 X						X							X			
9	0369				X							X					
10	0370 X										X		X				
11	0371 X							X					X				
12	0372			X				X						X			
13	0373				X							X	X				
14	0374 X										X	X					
15	0375			X							X		X				

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGN

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the (b) (6))

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____

DATE _____

TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____

DATE _____

TIME _____

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**
(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
		Bay	Gray	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USLD 0376				X			X							X		
17	0377	X										X			X		
18	0378	X										X	X				
19	0379	X										X		X			
20	0380		X						X			X					
21	0381	X							X					X			
22	0382	X										X		X			
23	0383	X										X		X			
24	0384	X										X	X				
25	0385	X										X		X			
26	0386	X										X		X			
27	0387		X									X		X			
28	0388	X										X		X			
29	0389		X						X					X			
30	0390	X										X		X			
31																	
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SIGNATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICES
STATEMENT OF SERVICES

Originating Office Phone

717-540-2770

Brian Moore

(b)(6)

Jonestown

PA 17038

Control Number: 01421700435

Office Id: APVSIC0142

Service Date(s)

Begin: 29-NOV-16

End: 29-NOV-16

Reference NR:

Code Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101 Slaughter Animals To Can Or Mx	7XVSIC0142VSIMPEXPTIC0142	56.00	1.00	56.00

Total Due \$ 56.00

Remarks: 20794

Payment Information

Nfc Id

Date	Amount	Payment Type	Account/Check #
29-NOV-16	\$ 56.00	Check	7284

Attention: Customers with government credit accounts - A consolidated monthly bill will be issued by the USDA, APHIS (signature accepting payment terms is on file). Upon receipt of the monthly bill, mail your payment to: USDA/APHIS, P.O. Box 979039 St. Louis, MO 63197-9000.

Notice to Payer: If payment of this Statement of Service is something other than cash or a US postal Money Order, the Statement of Service will not be considered paid in full until such tender has been cleared. If you have any questions, please contact the originating office listed above.

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICES
STATEMENT OF SERVICES

Originating Office Phone

717-540-2770

Brian Moore

(b)(6)

Jonestown PA 17038

Control Number: 01421700724

Office Id: APVSIC0142

Service Date(s)

Begin: 03-JAN-17

End: 03-JAN-17

Reference NR: VEHCS 21277

Code Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101 Slaughter Animals To Can Or Mx	7XVSIC0142VSIMPEXPTIC0142	56.00	1.00	56.00

Total Due \$ 56.00

Remarks: VEHCS 21277

Payment Information

Nfc Id

Date	Amount	Payment Type	Account/Check #
03-JAN-17	\$ 56.00	Check	7438

Attention: Customers with government credit accounts - A consolidated monthly bill will be issued by the USDA, APHIS (signature accepting payment terms is on file). Upon receipt of the monthly bill, mail your payment to: USDA/APHIS, P.O. Box 979039 St. Louis, MO 63197-9000.

Notice to Payer: If payment of this Statement of Service is something other than cash or a US postal Money Order, the Statement of Service will not be considered paid in full until such tender has been cleared. If you have any questions, please contact the originating office listed above.

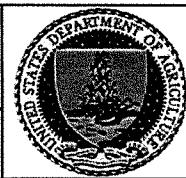
**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 3, 2017	Certificate Number VS-PA-17-CA-006-00021277
--	---	---

1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: January 3, 2017	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: *****
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
January 3, 2017

Certificate Number
VS-PA-17-CA-006-00021277

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0391	Bay	Quarter Horse	5 Years	Neutered Male		None	None	FETLOCK	None	FETLOCK	PASTERN	
2	0392	Black	Quarter Horse	7 Years	Female		BLAZE	None	None	None	None	None	
3	0393	Black	Quarter Horse	10 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	PASTERN	
4	0394	Bay	Quarter Horse	12 Years	Neutered Male		STAR STRIPE SNIP	None	None	None	None	None	
5	0395	Palomino	Quarter Horse	5 Years	Female		STAR STRIPE SNIP	None	None	None	FETLOCK	FETLOCK	
6	0396	Bay	Quarter Horse	5 Years	Female		BLAZE	None	None	PASTERN	None	None	
7	0397	Palomino	Quarter Horse	20 Years	Female		STAR	None	None	None	None	None	
8	0398	Sorrel	Quarter Horse	15 Years	Female		BLAZE	None	CORONET	None	None	FETLOCK	
9	0399	Sorrel	Quarter Horse	18 Years	Neutered Male		BLAZE	None	None	None	None	FETLOCK	
10	0400	Bay	Standardbred	16 Years	Female		STAR STRIPE SNIP	None	None	None	FETLOCK	FETLOCK	
11	0401	Bay	Standardbred	12 Years	Neutered Male		STAR	None	None	None	CORONET	PASTERN	
12	0402	Bay	Standardbred	10 Years	Neutered Male		None	None	PASTERN	None	PASTERN	None	
13	0403	Bay	Standardbred	18 Years	Neutered Male		STAR	None	None	None	PASTERN	CORONET	
14	0404	Black	Standardbred	12 Years	Female		None	None	None	None	None	None	
15	0405	Bay	Standardbred	15 Years	Neutered Male		STAR	None	None	None	None	None	
16	0406	Bay	Standardbred	14 Years	Neutered Male		STAR	None	None	None	None	None	
17	0407	Sorrel	Tennessee Walking Horse	20 Years	Neutered Male		BLAZE	None	None	None	None	None	
18	0408	Skewbald	Paint	8 Years	Female		STAR STRIPE SNIP	None	WHITE LEG	WHITE LEG	HOCK	HIND QTR	
19	0409	Sorrel	Saddlebred	12 Years	Female		STAR	None	None	None	FETLOCK	None	
20	0410	Bay	Quarter Horse	10 Years	Female		STAR	None	None	None	None	None	
21	0411	Skewbald	Paint	7 Years	Neutered Male		STAR STRIPE SNIP	None	WHITE LEG	KNEE	HIND QTR	HIND QTR	
22	0412	Skewbald	Paint	5 Years	Neutered Male		WHITE FACE	None	KNEE	KNEE	HIND QTR	HIND QTR	
23	0413	Bay	Standardbred	14 Years	Neutered Male		STAR	None	None	None	None	PASTERN	
24	0414	Black	Quarter Horse	10 Years	Neutered Male		None	None	None	None	CORONET	None	
25	0415	Bay	Quarter Horse	6 Years	Neutered		STAR STRIPE	None	None	None	None	PASTERN	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
January 3, 2017

Certificate Number
VS-PA-17-CA-006-00021277

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
26	0416	Sorrel	Quarter Horse	12 Years	Neutered Male		BLAZE	None	None	None	FETLOCK	FETLOCK	
27	0417	BUCKSKIN	Quarter Horse	10 Years	Female		None	None	None	None	None	None	
28	0418	Bay	Standardbred	15 Years	Neutered Male		STAR	None	None	None	PASTERN	None	
29	0419	Bay	Standardbred	12 Years	Neutered Male		None	None	None	None	CORONET	None	
30	0420	Bay	Standardbred	18 Years	Neutered Male		STAR SNIP	None	PASTERN	None	FETLOCK	FETLOCK	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 3, 2017	Certificate Number VS-PA-17-CA-006-00021277
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date January 3, 2017	Date January 3, 2017

CIRCLE Y VETERINARY SERVICES

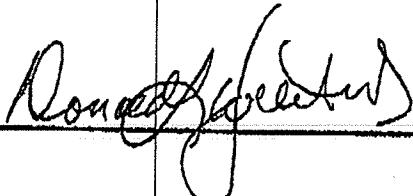
DONALD L. YORLETS, VMD
PO BOX 205 4698 YORK ROAD
NEW OXFORD, PA 17350
Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

21277 are accompanied with an Equine Information Document properly completed and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian



Date of signature 1/3/16

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY**

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET
CONSIGNOR (OWNER/SHIPPER) NAME <i>Brian Moore</i>		CONSIGNEE (RECEIVER/DESTINATION) NAME <i>Les Vrindes de la Petite Nation</i>
STREET ADDRESS (b)(6)		STREET ADDRESS <i>517 Rang St Solic Est</i>
CITY, STATE, ZIP CODE <i>Somersett PA 17038</i>		CITY, STATE, ZIP CODE <i>St Andre - Auillin</i>
(b)(6)		AREA CODE & TELEPHONE NO. <u><u> </u></u>

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE

- Pregnant mares are not likely to foal (give birth) during the trip.
 Foals are older than 6 months of age.

Horses are able to bear weight on all 4 limbs.
 Horses are not blind in both eyes.

Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE				SEX			BRANDS Tattoos, etc.	REMARKS include existing conditions	
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USLD 0391	X							X						X		
2	0392		X						X				X				
3	0393		X						X						X		
4	0394	X							X						X		
5	0395					X			X				X				
6	0396	X							X				X				
7	0397				X				X				X				
8	0398			X					X				X				
9	0399			X					X						X		
10	0400	X											X	X			
11	0401	X											X		X		
12	0402	X											X		X		
13	0403	X											X		X		
14	0404		X										X	X			
15	0405	X											X		X		

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING INTO CONVEYANCE.

(b) (6)

SIGNAT

I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER(I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN
FRONTERAS (DGIF)

EET

DATE

TIME

**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**

(Please type or print in ink)

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	156D 0406	X										X			X		
17	0407					X				X					X		
18	0408				X							X X					
19	0409				X							XX					
20	0410	X							X				X				
21	0411			X								X			X		
22	0412			X								X			X		
23	0413	X										X			X		
24	0414		X						X						X		
25	0415	X								X					X		
26	0416				X				X						X		
27	0417				X			X					X	X			
28	0418	X									X				X		
29	0419	X									X			X			
30	0420	X									X			X			
31																	
32																	
33																	
34																	
35																	
36																	
37																	
38																	
39																	
40																	
41																	
42																	
43																	
44																	
45																	

I HEREBY AUTHORIZE THE CFA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER/I certify that the information contained in this form is true and correct to the best of my knowledge.)

(b) (6)

PENNSYLVANIA USER FEE

PAYMENT TRACKING FORM

User Fee ID#964201

Shorthand Code: 5XVSIC0142VSIMPEXEXPTIC0142

Date January 3, 2017

APHIS 81 #01421700724

Check # 7438

Money Order #

Credit Card

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICES
STATEMENT OF SERVICES

Originating Office Phone

717-540-2770

Brian Moore

(b)(6)

Jonestown

PA 17038

Control Number: 01421700840

Office Id: APVSIC0142

Service Date(s)

Begin: 18-JAN-17

End: 18-JAN-17

Reference NR: 21451

Code Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101 Slaughter Animals To Can Or Mx	7XVSIC0142VSIMPEXPTIC0142	56.00	1.00	56.00

Total Due \$ 56.00

Remarks: VEHCS21451(CA)

Payment Information

Nfc Id

Date	Amount	Payment Type	Account/Check #
18-JAN-17	\$ 56.00	Check	7470

Attention: Customers with government credit accounts - A consolidated monthly bill will be issued by the USDA, APHIS (signature accepting payment terms is on file). Upon receipt of the monthly bill, mail your payment to: USDA/APHIS, P.O. Box 979039 St. Louis, MO 63197-9000.

Notice to Payer: If payment of this Statement of Service is something other than cash or a US postal Money Order, the Statement of Service will not be considered paid in full until such tender has been cleared. If you have any questions, please contact the originating office listed above.

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 18, 2017	Certificate Number VS-PA-17-CA-006-00021451	
1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525		2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada	
3. Country Of Origin: USA		4. State Of Origin: Pennsylvania	
5. Country Of Destination: Canada		6. Zone Of Destination: ****	
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038		8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port	
9. Estimated Date Of Shipment: January 18, 2017		10. Means Of Transport: Truck	
11.*****		12. CITES Permit Number: ****	
13. Description Of Commodity: Horses		14. Date Of Inspection: ****	
15. Total Quantity: 30		16. Additional Information: ****	
17. Total Number Of Packages/Containers: 1 Truck			
18. Identification / Seal Numbers: ****			
19. Commodities Intended Use: Immediate Slaughter		20. Type Of Admission: Permanent Import	
21. Identification Of Commodities: (See next page)			
**** **** ****			

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
January 18, 2017

Certificate Number
VS-PA-17-CA-006-00021451

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0421	Bay	Standardbred	6 Years	Neutered Male		None	None	None	None	None	None	
2	0422	Bay	Quarter Horse	7 Years	Female		STAR STRIPE SNIP	None	None	None	None	None	
3	0423	Bay	Quarter Horse	10 Years	Neutered Male		None	None	None	None	None	None	
4	0424	Bay	Quarter Horse	8 Years	Female		BLAZE	None	FETLOCK	FETLOCK	FETLOCK	F	
5	0425	Sorrel	Quarter Horse	20 Years	Neutered Male		BLAZE	None	None	None	FETLOCK	PASTERN	
6	0426	Bay	Standardbred	16 Years	Neutered Male		None	None	PASTERN	PASTERN	FETLOCK	CORONET	
7	0427	Sorrel	Quarter Horse	10 Years	Neutered Male		STAR	None	None	CORONET	None	None	
8	0428	Bay	Quarter Horse	12 Years	Female		STAR STRIPE SNIP	None	PASTERN	None	FETLOCK	None	
9	0429	Black	Quarter Horse	15 Years	Neutered Male		STAR	None	None	None	None	None	
10	0430	Sorrel	Quarter Horse	10 Years	Female		BLAZE	None	None	None	None	PASTERN	
11	0431	Bay	Standardbred	18 Years	Neutered Male		STAR	None	None	None	CORONET	None	
12	0432	Roan	Quarter Horse	15 Years	Female		BLAZE	None	None	None	PASTERN	None	
13	0433	Sorrel	Quarter Horse	5 Years	Female		BLAZE	None	None	None	None	None	
14	0434	Bay	Quarter Horse	7 Years	Female		STAR STRIPE SNIP	None	None	CORONET	PASTERN	P	
15	0435	Skewbald	Paint	8 Years	Neutered Male		BLAZE	None	KNEE	KNEE	HOCK	HIND QTR	
16	0436	Skewbald	Paint	6 Years	Neutered Male		STAR STRIPE SNIP	None	WHITE LEG	KNEE	HOCK	HOCK	
17	0437	Bay	Quarter Horse	5 Years	Neutered Male		BLAZE	None	None	None	FETLOCK	None	
18	0438	Skewbald	Paint	6 Years	Neutered Male		BLAZE	None	WHITE LEG	WHITE LEG	HIND QTR	HIND QTR	
19	0439	Bay	Quarter Horse	9 Years	Neutered Male		STAR	None	None	None	None	None	
20	0440	Bay	Quarter Horse	14 Years	Female		BLAZE	None	CORONET	CORONET	None	FETLOCK	
21	0441	Sorrel	Quarter Horse	5 Years	Female		BLAZE	None	PASTERN	PASTERN	PASTERN	None	
22	0442	Bay	Quarter Horse	7 Years	Neutered Male		STAR SNIP	None	CORONET	None	PASTERN	None	
23	0443	Bay	Quarter Horse	10 Years	Neutered Male		BLAZE	None	PASTERN	None	FETLOCK	PASTERN	
24	0444	Black	Standardbred	18 Years	Female		STAR	None	None	None	PASTERN	PAS	
25	0445	Bay	Standardbred	16 Years	Neutered		STAR	None	None	None	PASTERN	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue January 18, 2017	Certificate Number VS-PA-17-CA-006-00021451
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date January 18, 2017	Date January 18, 2017

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue

Certificate Number

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
					Male								
26	0446	Bay	Quarter Horse	12 Years	Female		STAR STRIPE SNIP	None	None	None	PASTERN	PASTERN	
27	0447	Sorrel	Tennessee Walking Horse	18 Years	Female		STRIPE WHITE MUZZLE	None	None	None	None	None	
28	0448	Bay	Quarter Horse	15 Years	Female		STAR	None	None	None	None	None	
29	0449	Black	Quarter Horse	20 Years	Female		STAR	None	None	None	None	None	
30	0450	Appaloosa	Appaloosa	5 Years	Female		BLAZE	None	None	None	None	None	

A scatter plot illustrating the relationship between the number of species (S) on the x-axis and the number of individuals (N) on the y-axis. The data points show a clear negative linear trend, indicating that as the number of species increases, the number of individuals generally decreases. A blue regression line is fitted to the data, showing a strong negative slope.

Number of species (S)	Number of individuals (N)
10	1000
20	500
30	333
40	250
50	200
60	167
70	143
80	125
90	111
100	100

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD

PO BOX 205 4698 YORK ROAD

NEW OXFORD, PA 17350

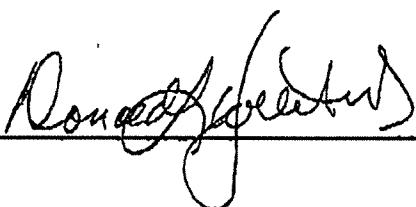
Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

21451, are accompanied with an Equine Information Document properly completed
and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian

Date of signature 1/18/17

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue February 2, 2017	Certificate Number VS-PA-17-CA-006-00021745
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1. Consignor: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6) Fax No. 717-865-2525	2. Consignee: LES VIANDES DE LA PETITE NATION 517 RANG STE - JULIE EST ST - ANDRE - AVELLIN, QUEBEC J0V 1W0 Canada
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania
5. Country Of Destination: Canada	6. Zone Of Destination: *****
7. Place Of Origin: BRIAN S. MOORE (b)(6) JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Champlain - Border Port
9. Estimated Date Of Shipment: February 2, 2017	10. Means Of Transport: Truck
11. *****	12. CITES Permit Number: *****
13. Description Of Commodity: Horses	14. Date Of Inspection: 01/29/2017
15. Total Quantity: 30	16. Additional Information: *****
17. Total Number Of Packages/Containers: 1 Truck	
18. Identification / Seal Numbers: *****	
19. Commodities Intended Use: Immediate Slaughter	20. Type Of Admission: Permanent Import
21. Identification Of Commodities: (See next page)	
***** ***** *****	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
February 2, 2017

Certificate Number
VS-PA-17-CA-006-00021745

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.
1	0451	Palomino	Quarter Horse	12 Years	Neutered Male		BLAZE	None	None	None	None	None	
2	0452	Bay	Standardbred	14 Years	Female		STAR	None	None	None	None	None	
3	0453	Bay	Standardbred	16 Years	Neutered Male		BLAZE	None	None	None	None	None	
4	0454	Bay	Standardbred	20 Years	Neutered Male		STAR	None	CORONET	None	PASTERN	CORONET	
5	0455	Sorrel	Quarter Horse	15 Years	Female		BLAZE	None	FETLOCK	None	PASTERN	FETLOCK	
6	0456	Appaloosa	Appaloosa	14 Years	Female		None	None	None	None	None	None	
7	0457	Appaloosa	Appaloosa	16 Years	Female		STAR STRIPE SNIP	None	None	None	FETLOCK	FETLOCK	ONE EYE
8	0458	Bay	Standardbred	12 Years	Neutered Male		None	None	None	None	CORONET	PASTERN	ONE EYE
9	0459	Bay	Quarter Horse	8 Years	Female		STAR	None	None	PASTERN	None	FETLOCK	
10	0460	Bay	Quarter Horse	7 Years	Female		STAR	None	None	None	None	None	
11	0461	Bay	Quarter Horse	5 Years	Female		BLAZE	None	CORONET	None	PASTERN	PASTERN	
12	0462	Bay	Quarter Horse	9 Years	Female		STAR	None	None	PASTERN	None	CORONET	
13	0463	Bay	Quarter Horse	6 Years	Female		BLAZE	None	None	None	FETLOCK	FETLOCK	
14	0464	Bay	Quarter Horse	12 Years	Female		STAR	None	None	None	None	None	
15	0465	Sorrel	Quarter Horse	8 Years	Female		STAR STRIPE	None	None	CORONET	PASTERN	FETLOCK	
16	0466	Bay	Quarter Horse	10 Years	Female		BLAZE	None	None	PASTERN	FETLOCK		
17	0467	Sorrel	Quarter Horse	9 Years	Female		BLAZE	None	None	None	FETLOCK	FETLOCK	
18	0468	Bay	Quarter Horse	15 Years	Female		STAR	None	None	None	None	None	
19	0469	Bay	Quarter Horse	10 Years	Neutered Male		STAR STRIPE	None	None	None	PASTERN	FETLOCK	
20	0470	Bay	Quarter Horse	14 Years	Neutered Male		None	None	None	None	CORONET	None	
21	0471	Bay	Quarter Horse	5 Years	Female		STAR SNIP	None	None	CORONET	PASTERN	PASTERN	
22	0472	Bay	PONY	7 Years	Female		STAR STRIPE SNIP	None	None	None	None	None	
23	0473	Bay	Quarter Horse	5 Years	Male		STAR SNIP	None	None	None	None	None	
24	0474	Bay	Quarter Horse	12 Years	Female		STAR	None	None	None	None	None	
25	0475	Bay	Quarter Horse	16 Years	Neutered Male		STAR SNIP	None	None	None	None	CORONET	
26	0476	Sorrel	Belgian	20 Years	Neutered Male		STAR	None	None	None	None	None	
27	0477	Sorrel	Belgian	20 Years	Female		BLAZE	None	None	None	None	FETLOCK	
28	0478	Bay	Standardbred	16 Years	Neutered Male		STAR	None	None	CORONET	None	CORONET	
29	0479	Bay	Quarter Horse	14 Years	Female		STAR SNIP	None	None	None	None	None	
30	0480	Bay	Quarter Horse	12 Years	Female		STAR STRIPE SNIP	None	FETLOCK	PASTERN	CORONET	None	

**Veterinary Health Certificate for Export of
Immediate Slaughter Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue February 2, 2017	Certificate Number VS-PA-17-CA-006-00021745
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

(Handwritten signature of Donald L. Yorlets, VMD)

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMC
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian <i>(Handwritten signature of F. D. Brown Jr. DVM)</i>
Date February 2, 2017	Date February 2, 2017

CIRCLE Y VETERINARY SERVICES

DONALD L. YORLETS, VMD

PO BOX 205 4698 YORK ROAD

NEW OXFORD, PA 17350

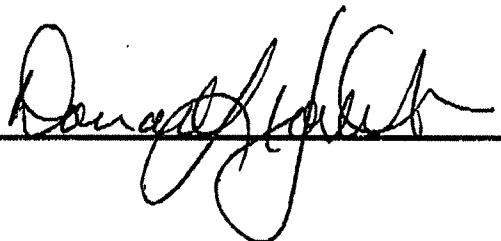
Ofc - 717.624.7333 Cell - 717.873.7401 Fax - 717.624.7610

EQUINE CERTIFICATION DOCUMENT

I, Donald L. Yorlets, VMD have verified that all equine included on the Export Health Certificate number:

21745 are accompanied with an Equine Information Document properly completed and signed by the owner. Number of EIDs that accompany the Health Certificate: 30

Signature of Accredited Veterinarian

Date of signature 2/2/17

Veterinary Health Certificate for Export of Breeding/Rearing Horses from the United States of America to Canada			
Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue May 18, 2017	Certificate Number VS-PA-17-CA-006-00024088	
1. Consignor: MOORES EQUINES FOR RESCUE (b)(6) JONESTOWN, PA 17038 United States Phone No. (b)(6)	2. Consignee: (b)(6) CAYUGA, ONTARIO N0A 1E0 Canada Phone No. (b)(6)		
3. Country Of Origin: USA	4. State Of Origin: Pennsylvania		
5. Country Of Destination: Canada	6. Zone Of Destination: *****		
7. Place Of Origin: MOORES EQUINES FOR RESCUE (b)(6) JONESTOWN JONESTOWN, PA 17038	8. Port Of Embarkation / Border Crossing: NY - Lewiston - Border Port		
9. Estimated Date Of Shipment: May 18, 2017	10. Means Of Transport: Truck		
11. *****	12. CITES Permit Number: *****		
13. Description Of Commodity: Horses	14. Date Of Inspection: 05/11/2017		
15. Total Quantity: 3	16. Additional Information: *****		
17. Total Number Of Packages/Containers: 1 Truck			
18. Identification / Seal Numbers: *****			
19. Commodities Intended Use: Breeding/Rearing		20. Type Of Admission: Permanent Import	
21. Identification Of Commodities: (See next page)			
***** ***** *****			

**Veterinary Health Certificate for Export of
Breeding/Rearing Horses from the United States of America to Canada**



Veterinary Authority	Date Of Issue	Certificate Number
UNITED STATES DEPARTMENT OF AGRICULTURE	May 18, 2017	VS-PA-17-CA-006-00024088

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.	EIA Test Used	EIA Test Date
1	1705-526	Grey	Missouri Fox Trotter	8 Years	Female		None	None	None	None	None	None		Coggins	5/11/17
2	1705-157	Chestnut	Tennessee Walking Horse	8 Years	Neutered Male		STAR, STRIPE, SNIP	None	None	None	None	None		Coggins	5/11/17
3	1705-527	Grey	Missouri Fox Trotter	7 Years	Female		None	None	None	None	None	None		Coggins	5/11/17

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**Veterinary Health Certificate for Export of
Breeding/Rearing Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue May 18, 2017	Certificate Number VS-PA-17-CA-006-00024088
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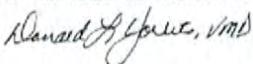
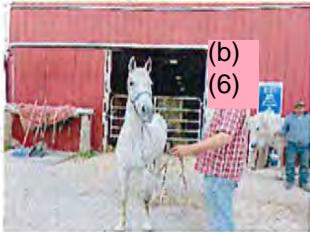
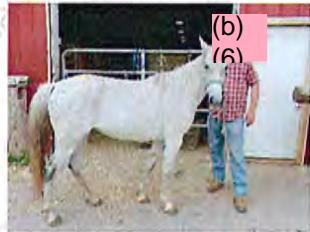
Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Negative agar-gel immunodiffusion (Coggins) test or ELISA for equine infectious anemia within six (6) months prior to exportation. The test selected is identified in the commodity table.
(Foals up to five months of age are exempt from the EIA requirement if they are imported into Canada at the same time as their dam and must be identified on the certificate of their dam or on a separate certificate of their own.)
7. The animals have not been on premises where *T. equigenitalis* has been isolated during the 60 days immediately preceding exportation to Canada or premises currently under quarantine or investigation for CEM. The females in the shipment have not been bred naturally to, or inseminated with semen from, a stallion positive for CEM, or a stallion resident upon positive premises or under quarantine or investigation for CEM. The animals showed no clinical signs of CEM on the day of inspection.
8. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date May 18, 2017	Date May 18, 2017

This Equine Infectious Anemia (EIA) test was processed by an NVSL Accredited Laboratory —GlobalVetLINK's eEIA test form contains all data fields as found on federal form VS 10-11

GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST			EIA-3730241		
SERIAL NO. PA-3730241	LAB / ACCESSION NO. E1704254	DATE SIGNED 2017-05-16	COUNTY LEBANON		
Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, and Telephone Numbers Will Not Be Processed.					
NAME & ADDRESS OF OWNER MOORE'S EQUINES FOR RESCUE (b)(6) JONESTOWN PA 17038 Phone: (b)(6) PIN: NA / LID: NA	NAME & ADDRESS OF VETERINARIAN Moore's Equine Rescue DONALD L. YORLETS VMD PO BOX 205 NEW OXFORD, PA 17350	NAME & ADDRESS OF STABLE/MARKET MOORE'S EQUINES FOR RESCUE (b)(6) JONESTOWN PA 17038 Phone: (b)(6) PIN: NA / LID: NA			
VETERINARY LICENSE OR ACCREDITATION NO. NAN: 059292	TEST TYPE AGID	REASON FOR TESTING Change of Ownership			
CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN I certify the specimen submitted with this form was drawn by me from the horse described below on the day indicated below.					
SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN 		SIGNATURE NAME DONALD L. YORLETS VMD	DATE BLOOD DRAWN 2017-05-11		
DONALD L. YORLETS VMD 2017-05-16 8:16 AM -07:00					
CERTIFICATION OF OWNER OR OWNER'S AGENT I certify that I have examined this form and, to the best of my knowledge and belief, this form is true, correct and complete.					
SIGNATURE OF OWNER OR OWNER'S AGENT		SIGNATURE NAME MOORE'S EQUINES FOR RESCUE	SIGNATURE DATE 2017-05-16		
NAME OF HORSE 1705-527	ID1 Back Tag: 527	ID2	ID3		
COLOR Gray	AGE OR DOB 7 est	BREED Missouri Fox Trotter	GENDER Mare		
REMARKS:					
					
NARRATIVE DESCRIPTION:					
HEAD: x					
LEFT FORELIMB: x	RIGHT FORELIMB: x				
LEFT HINDLIMB: x	RIGHT HINDLIMB: x				
OTHER MARKS AND BRANDS					
RABIES VACCINATION					
TYPE	VACC. DATE	PRODUCT	SERIAL NUMBER	EXPIR. DATE	ADMINISTERED BY
FOR LABORATORY USE ONLY					
LABORATORY PADLS-Pennsylvania Veterinary Laboratory 2305 N. Cameron Street Harrisburg PA 17110		TUBE NO. 101173639-0	DATE RECEIVED 2017-05-16	DATE REPORTED 2017-05-17	TEST RESULTS Negative
(b)(6)		SIGNATURE OF TECHNICIAN (b)(6)	(b)(6)	2017-05-17 12:00 PM -07:00	
NOTICE TO DOCUMENT INSPECTORS. This official document was authorized in agreement with the state of animal origin, issuing veterinarian, via GlobalVetLINK.com Please address any questions related to this document with your state or issuing state veterinarian's office.					

This Equine Infectious Anemia (EIA) test was processed by an NVSL Accredited Laboratory —GlobalVetLINK's eEIA test form contains all data fields as found on federal form VS 10-11

GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST

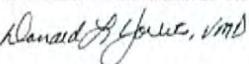
EIA-3730250

SERIAL NO. PA-3730250	LAB / ACCESSION NO. E1704260	DATE SIGNED 2017-05-16	COUNTY LEBANON
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Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, and Telephone Numbers Will Not Be Processed.

NAME & ADDRESS OF OWNER MOORE'S EQUINES FOR RESCUE (b)(6) JONESTOWN PA 17038 Phone: (b)(6)	NAME & ADDRESS OF VETERINARIAN Moore's Equine Rescue DONALD L. YORLETS VMD PO BOX 205 NEW OXFORD, PA 17350	NAME & ADDRESS OF STABLE/MARKET MOORE'S EQUINES FOR RESCUE (b)(6) JONESTOWN PA 17038 Phone: (b)(6)
PIN: NA / LID: NA		PIN: NA / LID: NA
VETERINARY LICENSE OR ACCREDITATION NO. NAN: 059292	TEST TYPE AGID	REASON FOR TESTING Change of Ownership

CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN I certify the specimen submitted with this form was drawn by me from the horse described below on the day indicated below.

SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN 	DONALD L. YORLETS VMD 2017-05-16 8:16 AM -07:00	SIGNATURE NAME DONALD L. YORLETS VMD	DATE BLOOD DRAWN 2017-05-11
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CERTIFICATION OF OWNER OR OWNER'S AGENT I certify that I have examined this form and, to the best of my knowledge and belief, this form is true, correct and complete.

SIGNATURE OF OWNER OR OWNER'S AGENT	SIGNATURE NAME MOORE'S EQUINES FOR RESCUE	SIGNATURE DATE 2017-05-16
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NAME OF HORSE 1705-526	ID1 Back Tag: 526	ID2	ID3
COLOR Gray	AGE OR DOB 8 est	BREED Missouri Fox Trotter	GENDER Mare

REMARKS:



NARRATIVE DESCRIPTION:

HEAD: x

LEFT FORELIMB: x	RIGHT FORELIMB: x
LEFT HINDLIMB: x	RIGHT HINDLIMB: x

OTHER MARKS AND BRANDS

RABIES VACCINATION

TYPE	VACC. DATE	PRODUCT	SERIAL NUMBER	EXPIR. DATE	ADMINISTERED BY
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FOR LABORATORY USE ONLY

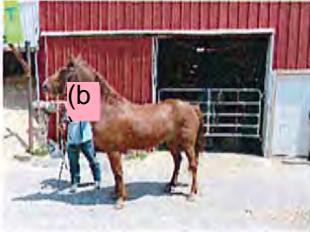
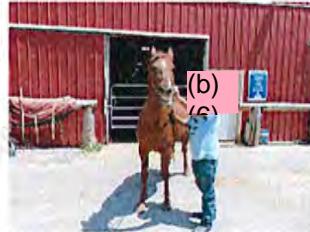
LABORATORY PADLS-Pennsylvania Veterinary Laboratory 2305 N. Cameron Street Harrisburg PA 17110	TUBE NO. 101173635-0	DATE RECEIVED 2017-05-16	DATE REPORTED 2017-05-17	TEST RESULTS Negative
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TECHNICIAN (b)(6)	SIGNATURE OF TECHNICIAN (b)(6)	(b)(6)
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2017-05-17 11:59 AM -07:00

NOTICE TO DOCUMENT INSPECTORS. This official document was authorized in agreement with the state of animal origin, issuing veterinarian, via GlobalVetLINK.com
Please address any questions related to this document with your state or issuing state veterinarian's office.

This Equine Infectious Anemia (EIA) test was processed by an NVSL Accredited Laboratory —GlobalVetLINK's eEIA test form contains all data fields as found on federal form VS 10-11

GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST		EIA-3730262			
SERIAL NO. PA-3730262	LAB / ACCESSION NO. E1704270	DATE SIGNED 2017-05-16	COUNTY LEBANON		
Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, and Telephone Numbers Will Not Be Processed.					
NAME & ADDRESS OF OWNER MOORE'S EQUINES FOR RESCUE (b)(6)		NAME & ADDRESS OF VETERINARIAN Moore's Equine Rescue DONALD L. YORLETS VMD PO BOX 205 NEW OXFORD, PA 17350	NAME & ADDRESS OF STABLE/MARKET MOORE'S EQUINES FOR RESCUE (b)(6)		
JONESTOWN PA 17038 Phone: (b)(6)		JONESTOWN PA 17038 Phone: (b)(6)	PIN: NA / LID: NA		
PIN: NA / LID: NA		TEST TYPE AGID			
VETERINARY LICENSE OR ACCREDITATION NO. NAN: 059292		REASON FOR TESTING Change of Ownership			
CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN I certify the specimen submitted with this form was drawn by me from the horse described below on the day indicated below.					
SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN <i>Donald L. Yorlets, VMD</i>		SIGNATURE NAME DONALD L. YORLETS VMD	DATE BLOOD DRAWN 2017-05-11		
2017-05-16 8:17 AM -07:00					
CERTIFICATION OF OWNER OR OWNER'S AGENT I certify that I have examined this form and, to the best of my knowledge and belief, this form is true, correct and complete.					
SIGNATURE OF OWNER OR OWNER'S AGENT		SIGNATURE NAME MOORE'S EQUINES FOR RESCUE	SIGNATURE DATE 2017-05-16		
NAME OF HORSE 1705-157		ID1 Back Tag: 157	ID2		
COLOR Chestnut		AGE OR DOB 8est	BREED Tennessee Walking Horse		
GENDER Gelding					
REMARKS:					
					
NARRATIVE DESCRIPTION:					
HEAD: star, strip, snip					
LEFT FORELIMB: x		RIGHT FORELIMB: x			
LEFT HINDLIMB: x		RIGHT HINDLIMB: x			
OTHER MARKS AND BRANDS					
RABIES VACCINATION					
TYPE	VACC. DATE	PRODUCT	SERIAL NUMBER	EXPIR. DATE	ADMINISTERED BY
FOR LABORATORY USE ONLY					
LABORATORY PADLS-Pennsylvania Veterinary Laboratory 2305 N. Cameron Street Harrisburg PA 17110		TUBE NO. 101173510-0	DATE RECEIVED 2017-05-16	DATE REPORTED 2017-05-17	TEST RESULTS Negative
(b)(6)		SIGNATURE OF TECHNICIAN (b)(6)	(b)(6)		2017-05-17 12:07 PM -07:00
NOTICE TO DOCUMENT INSPECTORS. This official document was authorized in agreement with the state of animal origin, issuing veterinarian, via GlobalVetLINK.com Please address any questions related to this document with your state or issuing state veterinarian's office.					



**Veterinary Health Certificate for Export of
Breeding/Rearing Horses from the United States of America to Canada**

Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue June 15, 2017	Certificate Number VS-PA-17-CA-006-00025006
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1. Consignor:
MOORES EQUINES FOR RESCUE
(b)(6)
JONESTOWN, PA 17038
United States
Phone No. (b)(6)

2. Consignee:
(b)(6)
CAYUGA, ONTARIO N0A 1E0
Canada
Phone No. (b)(6)

3. Country Of Origin:
USA

4. State Of Origin:
Pennsylvania

5. Country Of Destination:
Canada

6. Zone Of Destination:

7. Place Of Origin:
MOORES EQUINES FOR RESCUE
(b)(6)
JONESTOWN, PA 17038

8. Port Of Embarkation / Border Crossing:
NY - Lewiston - Border Port

9. Estimated Date Of Shipment:
June 15, 2017

10. Means Of Transport:
Truck

11. *****

12. CITES Permit Number:

13. Description Of Commodity:
Horses

14. Date Of Inspection:
6/14/2017

15. Total Quantity:
1

16. Additional Information:

17. Total Number Of Packages/Containers:
1 Truck

18. Identification / Seal Numbers:

19. Commodities Intended Use:
Breeding/Rearing

20. Type Of Admission:
Permanent Import

21. Identification Of Commodities:

(See next page)

**Veterinary Health Certificate for Export of
Breeding/Rearing Horses from the United States of America to Canada**



Veterinary Authority
UNITED STATES DEPARTMENT OF AGRICULTURE

Date Of Issue
June 15, 2017

Certificate Number
VS-PA-17-CA-006-00025006

21. Identification Of Commodities: Continued

Row	ID	Color	Breed	Age	Sex	Other ID / Tattoo	Head	Body	Limb LF	Limb RF	Limb LH	Limb RH	Add. Desc.	EIA Test Used	EIA Test Date
1	1706-159	CHESTNUT/ WHITE	Tennessee Walking Horse	11 Years	Female		BLAZE	None	STOCKING	KNEE	HIND QTR	HIND QTR		Coggins	6/8/17

**Veterinary Health Certificate for Export of
Breeding/Rearing Horses from the United States of America to Canada**



Veterinary Authority UNITED STATES DEPARTMENT OF AGRICULTURE	Date Of Issue June 15, 2017	Certificate Number VS-PA-17-CA-006-00025006
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Certification Statements:

1. The animals were inspected by a veterinarian within 30 days prior to export and found to be healthy and free from evidence of communicable disease.
2. The animals were, to the best of the knowledge and belief of the issuing veterinarian, not exposed to any communicable disease within 60 days preceding the date of inspection.
- The animals have resided in the United States or Canada since birth.
3. The animals, at the time of the inspection, were found healthy and in a physical condition fit to be transported.
4. The exporter has been advised that any deterioration in health or physical condition of the animals that may render animals unfit for transport may result in the shipment to be refused entry to Canada.
5. Regarding equine piroplasmosis, during the previous 21 days, the animals in this shipment have not been in the states of Texas or New Mexico.
6. Negative agar-gel immunodiffusion (Coggins) test or ELISA for equine infectious anemia within six (6) months prior to exportation. The test selected is identified in the commodity table.
(Foals up to five months of age are exempt from the EIA requirement if they are imported into Canada at the same time as their dam and must be identified on the certificate of their dam or on a separate certificate of their own.)
7. The animals have not been on premises where *T. equigenitalis* has been isolated during the 60 days immediately preceding exportation to Canada or premises currently under quarantine or investigation for CEM. The females in the shipment have not been bred naturally to, or inseminated with semen from, a stallion positive for CEM, or a stallion resident upon positive premises or under quarantine or investigation for CEM. The animals showed no clinical signs of CEM on the day of inspection.
8. Regarding Vesicular stomatitis (VS), all states in which the animal(s) have resided in the past twenty-one (21) days were free from clinical and epidemiological evidence of vesicular stomatitis during the twenty-one (21) days immediately prior to export to Canada.

Note: Fit to be transported means that, on the day of inspection, no animal has an infirmity, illness, injury or any other condition that could be aggravated when the animal is being transported, causing the animal to suffer.

Name of Accredited Veterinarian Donald L. Yorlets, VMD	Name of USDA Veterinarian F. D. Brown Jr. DVM, VMO
Signature of Accredited Veterinarian Electronically Signed	Signature of USDA Veterinarian
Date June 15, 2017	Date June 15, 2017

This Equine Infectious Anemia (EIA) test was processed by an NVSL Accredited Laboratory —GlobalVetLINK's eEIA test form contains all data fields as found on federal form VS 10-11

GlobalVetLINK - EQUINE INFECTIOUS ANEMIA LABORATORY TEST

EIA-3782948

SERIAL NO. PA-3782948	LAB / ACCESSION NO. E1705268	DATE SIGNED 2017-06-13	COUNTY LEBANON
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Forms Without Adequate Descriptions Of The Horse and Complete Addresses Including Zip Codes, and Telephone Numbers Will Not Be Processed.

NAME & ADDRESS OF OWNER MOORE'S EQUINES FOR RESCUE (b)(6) JONESTOWN PA 17038 Phone (b)(6)	NAME & ADDRESS OF VETERINARIAN Moore's Equine Rescue DONALD L. YORLETS VMD PO BOX 205 NEW OXFORD, PA 17350	NAME & ADDRESS OF STABLE/MARKET MOORE'S EQUINES FOR RESCUE (b)(6) JONESTOWN PA 17038 Phone: (b)(6)
PIN: NA / LID: NA		PIN: NA / LID: NA
VETERINARY LICENSE OR ACCREDITATION NO. NAN: 059292	TEST TYPE AGID	REASON FOR TESTING Change of Ownership

CERTIFICATION OF FEDERALLY ACCREDITED VETERINARIAN I certify the specimen submitted with this form was drawn by me from the horse described below on the day indicated below.

SIGNATURE OF FEDERALLY ACCREDITED VETERINARIAN <i>Donald L. Yorlets, VMD</i>	DONALD L. YORLETS VMD 2017-06-13 6:28 AM -07:00	SIGNATURE NAME DONALD L. YORLETS VMD	DATE BLOOD DRAWN 2017-06-08
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CERTIFICATION OF OWNER OR OWNER'S AGENT I certify that I have examined this form and, to the best of my knowledge and belief, this form is true, correct and complete.

SIGNATURE OF OWNER OR OWNER'S AGENT	SIGNATURE NAME MOORE'S EQUINES FOR RESCUE	SIGNATURE DATE 2017-06-13	
NAME OF HORSE 1706-159	ID1 Back Tag: 159	ID2	ID3
COLOR Chestnut/White	AGE OR DOB 11	BREED Tennessee Walking Horse	GENDER Mare

REMARKS:



NARRATIVE DESCRIPTION:

HEAD: blaze

LEFT FORELIMB: stocking	RIGHT FORELIMB: knee
LEFT HINDLIMB: hind Quarter	RIGHT HINDLIMB: Hind Quarter

OTHER MARKS AND BRANDS

RABIES VACCINATION

TYPE	VACC. DATE	PRODUCT	SERIAL NUMBER	EXPIR. DATE	ADMINISTERED BY
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FOR LABORATORY USE ONLY

LABORATORY PADLS-Pennsylvania Veterinary Laboratory 2305 N. Cameron Street Harrisburg PA 17110	TUBE NO. 101213006-0	DATE RECEIVED 2017-06-13	DATE REPORTED 2017-06-14	TEST RESULTS Negative
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TECHNICIAN (b)(6)	SIGNATURE OF TECHNICIAN (b)(6)	(b)(6)
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2017-06-14 10:04 AM -07:00

NOTICE TO DOCUMENT INSPECTORS. This official document was authorized in agreement with the state of animal origin, issuing veterinarian, via GlobalVetLINK.com
Please address any questions related to this document with your state or issuing state veterinarian's office.