



Shipping Document

209 S. 19th Avenue Suite 3
Bozeman, MT 59718
(406) 867-Beef (2333)
Fax: 888-500-0903

Head Count in Shipment:

General Information		
Shipping Date:	Anticipated Receiving Date:	
Origin		
Owner/Representative:		
Phone:	Cell:	
Address:		
Destination		
Owner/Representative:		
Phone:	Cell:	
Address:		
Shipping/Truck(s)		
Shipping Company(ies):		
Number of Trucks:		
PVP Program Information (Check all that apply)		
<input type="checkbox"/>	NHTC "Cattle Meet EV Program Requirements for the EU"	
<input type="checkbox"/>	VB-NE3	
<input type="checkbox"/>	Age and Source	
<input type="checkbox"/>	Cattle Care and Handling	
<input type="checkbox"/>	Calf Management	
Description of Cattle		
Visual Identification (Check all that apply)		
<input type="checkbox"/>	EID Tags	Range of Tag Numbers:
<input type="checkbox"/>	Panel Tags	Color(s):
<input type="checkbox"/>	Brand	Description:
<input type="checkbox"/>	Other	Description:
Hide Color(s):		
Other Information:		



Shipping Document

209 S. 19th Avenue Suite 3
Bozeman, MT 59718
(406) 867-Beef (2333)
Fax: 888-500-0903

Driver Responsibilities

Cattle Verified as VB-NE3:

- 1) If cattle are to be unloaded prior to the final destination I (the driver) will contact the producer and make arrangement for segregation, and feed so as to maintain program conformance.
- 2) If the number of cattle on this load does not fill the truck and I plan to load other cattle:
 - a. I have provided a signed affidavit describing my segregation procedures.

As the driver of this load of cattle I understand the cattle have been verified through a USDA PVP approved program as designated on this form. I also understand my responsibility to maintain conformance.

Driver Signature	Truck Number	Date
1)		
2)		
3)		
4)		
5)		
6)		
7)		
8)		

I, _____ am the present owner/agent for the identified animals and have directly controlled all relevant practices applied in their raising. I do affirm that the animals covered by this shipping document have never been fed or treated with hormonal growth promotants, antibiotics, or animal/avian by-products (as applicable) while under my control.

SIGNATURE _____ **DATE** _____

WARNING: Persons willfully making false, fictitious, or fraudulent statements or entries are subject to fine or imprisonment as prescribed by Title 18 U.S. Code 1001.