PARENT or LEGAL GUARDIAN

AFFIDAVIT FOR NEVER FED RACTOPAMINE HYDROCHLORIDE (BETA AGONIST) TO SWINE

Fair or Exhibition Site:				
Date of Exhibition Movement	t of Pigs to Harv	vest:		
Total Number of Pigs at this F	air or Exhibitio	n under the R	esponsibility of this Pa	rent or Legal Guardian:
PQA+ ID Number of Parent o	r Legal Guardiaı	n (if applicable	e)*:	
*Required for Ohio State Fair	exhibition			
Never F	ed Ractopamin	e Hydrochlorio	de (beta agonist) to Sw	<i>i</i> ine
	Parent o	r Legal Guardi	an Affidavit	
I,	, for	the pigs per	taining to this affidavi	it, take responsibility for
relevant practices applied in affidavit have never been fed	their raising fro	om birth to ha	rvest. I do affirm that	the pigs covered by this
or any generic derivative) from where they were raised while				
animals from ownership at b	•			_
written request.				
Legal Guardian or Parent Nar	ne, Postal Addr	ess, Phone an	d Email Address	
		Description of	Animals	
		Description of	Allillais	
Unique Identification at the Fair or Exhibition (Individual Pig ID, 840 ID)	Pig Tattoo Number	Sex of Animal (Gilt or Barrow)	Breed or Color Description	Person Receiving Producer Affidavit
I certify that all state	ments made he	rein are true t	o the best of my know	/ledge.
Signature:	Date:			
Printed Name and Title:				
Warning: Porsons willfully making falso				

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