

Phone Number __

TORRINGTON LIVESTOCK CATTLE SHIPMENT CERTIFICATION

		Date	Date Sold	
larkets	s, LLC			
Print Name				30
Lot #		Number of Head:	Steers	Heifers
	(City, State)		between the following date	
From	to	rnonth/day/year		
	rn out date for this calf cr	op was		
Neaning Da	te:month/day/year	n	nonth/day/year	×.
Please chec	k the appropriate boxes: These cattle were hoi These cattle were pui	me raised	ed 19	
Hav	e Have Not		promoting compound (implanted in the compounds with hormo	
2. Will	Will Not		Natural": vth promotants, antibiotics onal affidavits required by t	
3. <u>Yes</u>	<u>No</u>	•	s given subcutaneously or an 5cc per injection site re	
Fede Shots:	eral Food, Drug and Cosr Date	netic Act CFR 589.2000. Produc		
Pre-Wea	ning		<u> </u>	
Weaning	Yearling			
Signature				
Address			72.	
	vestock Representative			

FIVE RIVERS

Five Rivers Cattle Feeding

28625 US Highway 34, Kersey, Colorado 80644 Phone: 970.670.0973 Fax: 970.356.6070

Producer Confirmation of Understanding of Five Rivers Natural Program Requirements

I, acknowledge that I have reviewed a copy of the Five Rivers
Natural Producer Manual.
This Manual is available online at https://fiveriverscattle.com/pages/selldirect/default.aspx
Hard copy is also available upon request.
I have reviewed these standards and understand that if for any reason my operation is not in full
compliance; my cattle may be ineligible for the Five Rivers Natural program until corrective actions have
been made.
To ensure this, I understand a representative from Five Rivers Natural and/or approved 3 rd party may
visit my operation to confirm compliance.
I agree, to the best of my ability, to raise cattle while under my direct control in compliance with the
requirements laid out by the Five Rivers Natural Program.
Producer Signature: Date:

Document Number: AR001; Appendix A1

Revision Date: 3/16/18



FIVE RIVERS CATTLE FEEDING

28625 U.S. Highway 34 Kersey, Colorado 80644 Phone: 970.670.0973

Fax: 970.356.6070

All Natural Cattle Affidavit
(For Office Use)
Contract # Lot #

Revision Date: 3/16/18

Each Location (Ranch-Background-Feedlot) MUST COMPLETE IN FULL, their respective section. Retain a copy for your records and forward affidavit to Five Rivers within a month of delivery.

THE CATTLE REPRESENTED BY THIS AFFIDAVIT HAVE:

- Never received growth promotants, synthetic hormones, or steroids of any kind.
- Never received antibiotics; including ionophores.
- Never been fed any animal-derived feedstuffs.
- A minimum of 50% Red or Black Angus Genetics.
- No Dairy influence.
- U.S. Born and Raised origin.

Document Number AR003

 Been raised in compliance w/ HFAC Animal Care Standards for beef cattle.

NON-ALLOWABLE PRODUCTS (Including but not limited to):

Actogain, Compudose, Component, Dexamethasone, Encore, Estroplan, Estrumate Lutalyse, Prostamate, Ralgro, Revalor, Synovex, MGA, Heifermax, Optaflexx, Zilmax. Antibiotics - Advocin, AS700, LA200, Aureomycin, Baytril, Biomycin, CTC, Draxxin, Neomycin, Enroflox, Erythromycin, Excede, Excenel, Gallimycin, Gentocin, Hexasol, Micotil, Naxcel, Norfenicol, Nuflor, Oxytetracycline, Penicillin, Pulmotil, Resflor, Spectinomycin, Sulfa's, Terramycin, Tetradure, Tylan, Tylovet, Zactran, Zuprevo. Ionophores - Bovatec, Cattlyst, Gain-Pro, Rumensin, V-Max.

Feedstuffs - Feather meal, Fish Oil, Tallow, Poultry Litter, Yellow Grease

Milk Replacer(post-wean).

All records must be retained for a minimum of three years and made accessible to a Five Rivers Representative or approved 3rd party.

Any Cattle or Operation found out of compliance with stated requirements will be disqualified from the program indefinitely.

Cow/Calf Producer: (Please print)		
Ranch Name:	Phone: (
Address:	City :	State: Zip:
Date of First Calf Born: /	/	
		s / No) Brand ID or Symbol
Number of Head: (Steers)	(Heifers)	Calves Shipped: / /
Ranch Manager / Signature:		
Backgrounder: (Please Print)		o) No, indicates cattle moved direct to feedlot.
		1
Location Name:	Phone. ()
Address:	City :	State: Zip:
Date Cattle Arrived: /	/ Number Hd Received	d:
Manager / Signature:		_
***********	^^^^^^	
Feedlot: (Please Print)		
Feedlot Name: FIVE RIVERS CATTLE FEED!	ING - Kuner Feedlot Phone: (970	0)670-0973
Address: 28625 U.S. Highway 34	City: Kersey	State: <u>CO</u> Zip: <u>80644</u>
Date Cattle Arrived: /	/ Number Hd Receive	ed: Assigned Lot #:
Manager / Signature:		

Appendix A



Wyoming Authentic Products (WAP) All Natural Angus Cattle Affidavit

Affidavit	#:	

Rancher/Producer is required to fully complete and sign this Affidavit. A signed original to be given to a WAP representative and a copy kept by the Rancher/Producer for his/her records.

The Angus cattle referred to in this Affidavit are in accordance with Wyoming Authentic Products' Requirements – specifically:

- 50% or higher Black Angus or Red Angus genetics.
- Born, raised and fed in the state of Wyoming, USA.
- Never, ever given any growth implants or synthetic hormones.
- Never, ever given any type of antibiotics or ionophores.
- Raised on grass and grains never fed any animal byproducts ever.
- Raised within National Beef Council Beef Quality Assurance (BQA) Guidelines.
- 30 months of age or less when slaughtered.

Cow/Calf Producer (print all information)

Producer Contact (Print)	Ran	ch Name:		
Address: City/State/Zip		Phone	·	_
First Birth Date, Month/Day/Year of Cattle	·	/	or an estimated process	sing/slaughter
Signature of Producer Contact:		_ Date:		
Feedlot Owner/Manager (print all informa	ition)			
Feedlot Name (Print)		Pho	one:	
Address: City/State/Zip				_
Method by which Cattle				
ldentified:				
Date Cattle Received into Feedlot:	# of Head:	Lot#	Pen#	
Date cattle received into receiot.			Date:	

Note: All Rancher/Producer and Feedlot tracking information referred to above to be kept at least 3 years and made available to WAP upon request.

Kluterments

Klute Investment Services, Inc.

73934 J. Road

Holdrege, NE 68949

308-876-2183 (Office) 308-876-2135 (Fax)

The undersigned certifies the following:

These Angus/Angus cross or multi-breed cattle have been raised from birth in a humane manner, using no antibiotics, no hormones, or growth stimulants, and that all animals receiving medication have been identified and removed from the program. These cattle, delivered to Klute Investment Services, Inc. are here by verified by the Rancher/Owner to be between 16 and 18 months of age or less.

In addition, the feeds used in the production of these animals did not contain antibiotics, animal by-products, ionophores or growth hormones. The market we are supplying demands high quality beef taised and fed without the use of artificial growth stimulants or antibiotics. We are committed to supplying this market with source verified All Natural Cattle.

Cattle represented by this document have never been administered antibiotics (injected or fed therapeutic or subtherapeutic), inophores (Rumensin and/or Bovatec); Beta-Agonists (Optaflex, Zilmax) supplemental hormones or growth promoting implants or fed animal by-products.

Cattle represented by this document <u>have been</u> handled and cared for according to National Beefs Animal Welfare Policies for Natural Beef, fed an all vegetarian diet for the life of the cattle and born and mised in the United States.

Cattle represented by this document have no evidence of Brahman and Dairy influence.

Breeds of cattle documented on this affidavit as Black Angus or Black Angus cross bave, at minimum, 50% Black Angus genetics and meets Black Angus Phenotype.

Breeds of cartle documented on this affidavit as Red Angus or Red Angus cross have, at minimum, 50% Red Angus genetics and meets Red Angus Phenotype.

The above information is complete and accurate. I understand that this documentation is part of National Beef's Nature Source Natural Beef Programs and I have adequate records to support the above information. I agree to keep all records supporting this affidavit and this affidavit on file for a minimum of 1 year. I understand that my appearations and documents may be audited by National Beef.

Date:	
PLEASE PRINT INFORMATION AS CLEARLY AS	POSSIBLE!
Name of Company or Owner	€.0
Address	
Administration of the second o	
Phone #	
Owner or Manager Signature	Ab
Flead Count Shipped	4
Steers/Heifers/Mixed	

Robbins and Robbins, L.L.P.
PO Box 17004
Missoula, Mt 59808
406-549-1466 406-728-1174(Fax)

The undersigned certifies the following:

These Angus / Angus cross cattle have been raised from birth in a humane manner, using no antibiotics, no hormones, or growth stimulants, and that all animals receiving medication have been identified and removed from the program. These cattle, delivered to Robbins and Robbins, L.L.P. are hereby verified by the Rancher/Owner to be less than 16 months of age.

In addition, the feeds used in the production of these animals did not contain antibiotics, animal by-products, ionophores or growth hormones. The market we are supplying demands high quality beef raised and fed without the use of artificial growth stimulants or antibiotics. We are committed to supplying this market with source verified All Natural Cattle.

Please Print Information As Clearly As Possible

Date:	¥ 2	!	
Name of Company Owner	a 420 (6)		
Address			, ,

Phone #			
Owner or Manager Signature			(45
Head Count Shipped			
Steers/Heifers/Mixed			



Wyoming Authentic Products (WAP) All-Natural Angus COW(S) Affidavit

Affidavit	#:	
Affidavit	#:	

Rancher/Producer is required to complete and sign this Affidavit. A signed copy to be scanned and emailed to Jim Prior at jprior@wyproducts.com or faxed to him at (888) 614-3019, and a copy kept by the Rancher/Producer for his/her records.

The Angus COW(S) referred to in this Affidavit is (or are) in accordance with Wyoming Authentic Products' Requirements – specifically:

- 50% or higher Black Angus or Red Angus genetics.
- Raised and fed in the state of Wyoming, USA.
- Never, ever given any growth implants or growth hormones.
- Never, ever given any antibiotics.
- Raised and fed on grass never fed any animal byproducts ever.
- Fed hay during inclement weather.
- Any cattle which become sick and are treated with antibiotics are not acquired by Wyoming Authentic Products.
- Raised within National Beef Council Beef Quality Assurance (BQA) Guidelines.

COW Producer (print all information)

Producer Contact (Print) F	lanch Name:
Address: City/State/Zip	Phone:
Signature of Producer Contact:	Date:
Method by which COW(S) Identified:	
Date COW(S) Shipped from Ranch:	_# of Head: Lot # (if applicable)

Note: All Rancher/Producer information referred to above to be kept at least 2 years in case needed.

NATIONAL BEEF NATURESOURCE ANGUS/NATURAL ANGUS CATTLE CHAIN OF CUSTODY AFFIDAVIT This document is completed (by only trained personnel) each time management control of the cattle is changed. This document is kept on

file at each location for a minimum of 2 years.

Cattle represented by this document have never been administered antibiotics (injected or fed/therapeutic or sub-therapeutic), ionophores (Rumensin and/or Bovatec); Beta-Agonists (Optaflexx, Zilmax), supplemental hormones/ growth promoting implants or fed animal (beef tallow) or bird by-products.

Cattle represented by this document have been humanely raised and handled according to the requirements listed in the Program. Cattle represented by this document have only been fed an all-vegetarian diet.

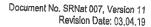
Cattle represented by this document are born and raised in the United States. Cattle represented by this document have no predominantly Brahman ears or Humps. Cattle have no dairy influence.

Breeds of cattle documented on this affidavit as being Black Angus influenced, have at least 50% Black Angus genetics and meet the Black Angus Phenotype requirements (as stated in the NatureSource Program and the USDA AMS AAA Specifications) or meet the USDA AMS PVP Angus Source Program and are identified with Angus Source Visual Tags or represented by the National Beef Genotype Angus

Breeds of cattle documented on this affidavit as being Red Angus influenced, have at least 50% Red Angus genetics and meet the Red Angus Phenotype requirements (as stated in the Program) or meet the USDA AMS PVP Red Angus Program and are identified with USDA AMS PVP Red Angus Feeder Calf Visual Tags or represented by the National Beef Genotype Affidavit.

SOURCE RANCH/FARM COMPLETES T	HIS SECTION:	
Ranch/Farm Name AND Contact Information		Cattle identification - Describe in detail how the cattle are identified
		that is unique to your ranch/farm and/or this calf crop.
		+
Number of calves represented by this document	: Date Shi	nned to Next Operation
		W.
Breed(s) of Cattle:		Name of Next Operation:
above. I understand this document is part of	the National Reef Natur	eattle represented by this document meet all the requirements listed reSource Angus/ Natural Angus Beef Program and I have adequate
records to support the above information.	agree to keep all records	supporting this affidavit as wall as a name of this affidavit as file for
minimum of 2 years. National Beef is allowed	l to audit my operation a	nd records pertaining to the program.
(Original) Ranch/Farm Representative Signs	iture:	Date:
GROWING PHASE OPERATION COMPL	ETES THIS SECTION	
Date calves are received.	# -6114 D!4	// CYT 172: 110: 4
Date on ves are recorved.	# of Head Received:	# of Head Disqualified:
Operation Name AND Contact Information		Cattle identification - If any changes were made to the identification
		of the cattle, describe those changes below.
The above information is complete and accur	ate and I attest that all c	ualified cattle represented by this document meet all the
requirements listed above. I understand this	document is part of the l	National Beef NatureSource Angus/Natural Angus Reef Program
and I have adequate records to support the all	bove information. I agre	se to keep all records supporting this affidavit as well as a copy of this audit my operation and records pertaining to the program.
andarii on me tor a minimum of 2 years. 14a	nonal pect is allowed to	audit my operation and records pertaining to the program.
Growing Phase Operation Representative Sig	motuvo	Date:
Topicontative Dig	,nature.	
FEEDLOT COMPLETES THIS SECTION		
Date calves are received:	# acttand Decimal	# of Head Disqualified:
Date ourves are received,	_# of Head Received:	# of Head Disquained:
Feedlot Name AND Contact Information		Cattle identification - If any changes were made to the identification
		of the cattle, describe those changes below.
The above information is complete and accur-	ate and I attest that all q	nalified cattle represented by this document meet all the
requirements listed above. I understand this	document is part of the I	National Beef NatureSource Angus/ Natural Angus Beef Program
and I have adequate records to support the all affidavit on file for a minimum of 2 years. Na	nove information. I agre tional Beef is allowed to	e to keep all records supporting this affidavit as well as a copy of this audit my operation and records pertaining to the program.
Feedlot Renresentative Signature		Date of Cattle Verification:
Original Date: 8/10/12		Date of Cattle Verification;
Revised Date: 4/1/20		

Confidential Company Information





TYSON FRESH MEATS NAE BEEF AFFIDAVIT

This affidavit must be completed by approved producers, growers, and feedlots upon shipment of cattle to a feedlot or Tyson plant.

Cattle eligible for NAE BEEF program must also meet criteria described for phenotypic or genotypic qualification of Angus breed specifications, as described in the Tyson Fresh Meats NAE Feedlot Minimum Requirements (SRNat 008) document. I, (manager or owner name-PRINT): _______doing business as (Company / Feedyard / Ranch Name) _____ ______ City: _____ State: ____ Zip: _____ Address: As an approved: Original Producer (ranch of birth) Backgrounder/Grower (only check if cattile grown were NOT born on premise) Feedlot (finish cattile only) Global Animal Partnership GAP Certificate #:______ Expiration Date:_____ Third Party Verifler (company name - PRINT): (Put an X in the box for all that apply for the cattle referenced below) -----I/we have abided by the following production procedures listed in 1, 2, 3, & 4 below while under my care to qualify the animals identified on this document as eligible, in part, to supply NAE cattle: 1. In raising these animals, the following have never been used while under my care: a. Supplemental hormones, of any kind, in the feed or via implant Steroids and beta-agonists Antibiotics, including ionophores, either therapeutic or sub-therapeutic (non-antibiotic coccidiostats labeled for use in cattle are allowed) Animal-derived feedstuffs, of any kind (tallow, fish oil, feather meal, blood meal, etc.) 2. The feed used for these animals did not come in contact with conventional feeds containing any of the above-mentioned items; and the proper documentation (i.e., feed labels, feed supplier affidavits, etc.) to confirm compliance with production claims has been kept and will be available for a period of two years. Each animal is identified and all animals receiving medication or deemed ineligible for any reason have been identified. Good animal husbandry practices have been followed to provide proper housing, good nutrition, and low stress handling to ensure each animal's health and well-being has been maintained. I attest that all livestock referenced by this document and transferred are of U.S.A. origin (i.e., born and raised in the U.S.A.). The undersigned, previously agreeing to adhere to these rules, confirms that to the best of his/her/its knowledge the cattle identified below meet each of the four NAE requirements above and will cooperate to resolve any issues that may arise that would lend doubt to the eligibility of any of the cattle referenced by this document. Furthermore, I understand that this documentation is part of the slaughter facility's Cattle Age Verification Program and I have records to support the above information. I agree to keep all records supporting this Age Verification and this affidavit on file for a minimum of three years. I understand that my operations and documents may be audited. Lot #/Group ID: _____ Head Count: ____ Sex: _ STR _ HFR _ MXD Ship Date: ___ This section is to be completed by the seller and describe the identification of the cattle at the time of sale / delivery. Birthdate of Oldest Animal in the Lot: ___ Tag Manifest Attached: Yes No Describe Ranch Tags (color, #s, etc):____ Ranch Brand: Yes No Draw Brand & Indicate Brand Location: SUBMITTED by: _____ Seller's Signature Phone # Date FOR SLAUGHTER FACILITY INTERNAL USE ONLY Document Review & Approval by: ______(Yards Mgr or Designee) Total Head Count Received: _____ Number of Head Removed from Program: _____ Reason for Removal from Program: ____ FSQA VERIFIED SIGNATURE: ___ DATE:



Creekstone Farms Natural Black Angus Source Verification Affidavit

CFPB ID#

Rev. 4/6/06

Complete and sign this farmer	Rev. 4/6/06
Complete and sign this form. Return the form to a Creekstone R in the self- addressed envelope provided OR fax to 620-741-3195 to become eligible for the CFPB natural program.	arms Premium Beef, LLC (CFPB) designated agent. Document must be signed and completed in order
1. The genetic walls	

- The genetic make up of these cattle are Black Angus or Black Angus cross and managed to promote the Creekstone Farms Premium Beef, LLC promise to the consumer.

 No running meat, bone meal, or tallow has been fed to any of the cattle specified on this form.

 The cattle specified on this form have been fed 100% vegetarian diet.

 The cattle specified on this form have been handled in a humane manner.

 No antibioticslar ionephores have ever been fed or administered to any of the cattle specified on this form.

- No antibiotics or ionophores have ever been fed or administered to any of the cattle specified on this form. No implants or growth promotants have ever been administered to any of the cattle specified on this form.

 These cattle are of United States origin, have never left the United States and source verifiable to birthplace.
- 8. Management records will be kept and accessible to the Auditor, Creekstone Farms Representative, USDA and/or purchaser of cattle upon request. I understand that my records may be audited.

Manager/Owner Signature Please print Name: Address First Born DOB (M/D/Y) Cattle Transferred To: (B) Stocker/Backgrounder Manager/Owner Signature Please print Name: Address Date Received Brand, Tag, EID, Other Cattle Transferred To: (C) Feedlor Manager/Owner Signature Please print	Head Count	Telepho Sex Sex	City Estimated Sale W Date City	State	County f Transfer & Transferred	Zip Cod
First Born DOB (M/D/Y) First Born DOB (M/D/Y) Cattle Transferred To: (B) Stocker/Backgrounder Manager/Owner Signature Please print Name: Address Date Received Brand, Tag, EID, Other Cattle Transferred To: (C) Feedlor Manager/Owner Signature	Head Count	Sex	City Estimated Sale W Date City	State Date of	County f Transfer & Transferred	Location To
First Born DOB (M/D/Y) First Born DOB (M/D/Y) Cattle Transferred To: (B) Stocker/Backgrounder Manager/Owner Signature Please print Name: Address Date Received Brand, Tag, EID, Other Cattle Transferred To: (C) Feedlor Manager/Owner Signature		Sex	City Estimated Sale W Date City	Date o	f Transfer & Transferred	Location To
First Born DOB (M/D/Y) First Born DOB (M/D/Y) Cattle Transferred To: (B) Stocker/Backgrounder Manager/Owner Signature Please print Name: Address Date Received Brand, Tag, EID, Other Cattle Transferred To: (C) Feedlor Manager/Owner Signature		Telephon	Estimated Sale WI Date e #: City	Date o	f Transfer & Transferred	Location To
Cattle Transferred To: (B) Stocker/Backgrounder Manager/Owner Signature Please print Name: Address Date Received Brand, Tag, EID, Other Cattle Transferred To: (C) Feedlor Manager/Owner Signature		Telephon	Datee#:	State	f Transfer & Transferred	Location To
Cattle Transferred To: (B) Stocker/Backgrounder Manager/Owner Signature Please print Name: Address Date Received EID, Other Cattle Transferred To: C) Feedlor Manager/Owner Signature		Telephon	Datee#:	State	Iransferred	To
Cattle Transferred To: (B) Stocker/Backgrounder Manager/Owner Signature Please print Name: Address Date Received Brand, Tag, EID, Other Cattle Transferred To: (C) Feedlor Manager/Owner Signature		Telephon	Datee#:	State	Iransferred	To
(B) Stocker/Backgrounder Manager/Owner Signature Please print Name: Address Date Received Brand, Tag, EID, Other Cattle Transferred To: (C) Feedlor Manager/Owner Signature			e#: City	State		Zip Cod
Date Received Brand, Tag, EID, Other Cattle Transferred To: C) Feedlor. Manager/Owner Signature	Head Count		e#: City	State		Zip Cod
Date Received Brand, Tag, EID, Other Cattle Transferred To: C) Feedlor	Head Count		City		County	Zip Cod
Cattle Transferred To: (C) Feedlor. Manager/Owner Signature	Head Count	Sex			County	Zip Cod
Cattle Transferred To: C) Feedlor. Manager/Owner Signature	Head Count	Sex	*		1	P
C) Feedlot. Manager/Owner Signature			Estimated Sale WT	Date of	Transfer & Transferred	Location.
C) Feedlot. Manager/Owner Signature			3		randicitett	10
			Date		n	36
Vanue:		Telephone				
Address		тетерион	City · · ·	State	County	Zip Code
. ,						-AP 3000
Date Received Lot/Pen No. 1	Head Count	Sex	Estimated Sale WT	Date of T	Transfer & L	ocation
	1				WARREST FOR T	0 .



Meyer Natural Angus Program

Meyer Natural Foods 1990 Rocky Mountain Ave. Loveland, CO 80538 Phone: 970-292-5006 Fax: 970-292-5542

Cattle Affidavit

All producers must sign and complete in full their appropriate segment of this affidavit. Completed affidavit must be provided to an MNF Representative.

MNA #

Contract #

For Office use only:

Revision Date: 1/19/2018

Before completing and signing, read this section carefully to ensure your cattle uphold MNF Standards.

- 50% Red or Black Angus Genetics (Determined by using the simple average of the Angus Genetics in the Sire and the Dam.)
- Never received ionophores, antibiotics, or beta-agonists.
- Never been administered any growth implants or hormones.
- Vegetarian Fed: No Mammalian, Fish, or Avian By-Products with the exception of milk or milk derived products.
- Raised in accordance with MNF Humanely Handled Standards.
- No Dairy influence.
- No bulls or stags.
- Have been fed an MNF Approved Direct Fed Microbial (DFM) during the finishing phase.
- Born and Raised in the USA.
- Less than 30 months of age at slaughter.
- Management records kept for minimum of 3 years.

Producers are subject to on-site evaluations on all Standards included on this affidavit.

COW/CALF PRODUCER: (Please print) Name / Ranch: _			
Address:	Date of First Calf Born:		
City: State: Zip:			
Form of ID (check all that apply): Visual Tag EID Tag Brand	Sex (check one): Steer Heifer Mixed		
If Producer finished cattle at home, Direct Fed Microbial (DFM) used :	Not Applicable		
Print Name:	Phone:		
Signature:	Date signed:		
BACKGROUNDER: (Please Print) Were calves grown at a	location other than home ranch or feedlot?		
Name / Company:	If Yes, complete this section		
Address:	City: State: Zip:		
Print Name:	Phone:		
Signature:			

FEEDLOT: (Please Print) Were calves finished at home rance	h? Yes No If No, complete this section:		
Name / Company:	Lot # (if applicable):		
Address:	Approved Direct Fed Microbial (DFM) used		
City: State: Zip:			
Print Name:			
Signature:			

Dicke Natural Beef Cattle Affidavit

This document is to be completed by producers of Natural Angus cattle.

This document to be kept on file for a minimum of two years.

Cattle represented by this document <u>have never been administered</u> antibiotics (Injected or fed/therapeutic or sub-therapeutic), ionophores (Rumensin and/or Bovatec); Beta-Agonists (Optaflexx, Zilmax), supplemental hormones/growth promoting implants or fed animal (beef tallow) or bird by-products.

Cattle represented by this document <u>have been</u> humanely raised and handled in a low stress manner, according to industry standards. Cattle represented by this document <u>have only been fed</u> an all vegetarian diet, plant based.

Cattle represented by this document are born and raised in the United States. Cattle represented by this document <u>have no predominantly Brahman ears or Humps. Cattle have no dairy influence.</u>

No Hereford influence, except black baldies. No feather necks.

Breeds of cattle documented on this affidavit as being Black Angus influenced, have at least 50% Black Angus genetics and meet the Black Angus Phenotype requirements or meet the USDA AMS PVP Angus Source Program and are identified with Angus Source Visual Tags.

Breeds of cattle documented on this affidavit as being Red Angus influenced, have at least 50% Red Angus genetics and meet the Red Angus Phenotype requirements or meet the USDA AMS PVP Red Angus Program and are identified with USDA AMS PVP Red Angus Feeder Calf Visual Tags.

Head Count	Sex	Breed of Cattle	Cattle ID Tag Info &/or Brand Info
Birthdate of oldest animal	:	,	
Ranch Name:			
Ranch Contact:			
Address:			
Phone #:			
Signature:		Date:	* :

Company confidential information. Do not copy without permission.