

R3

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
711751

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

(Please type or print in ink)

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				
USGV	4462					✓												Fit hip	042244
	4463	✓												✓	✓				058001
	4464				✓									✓	✓				058188
	4465			✓										✓		✓			104171
	4466						dup							✓		✓			084262
	4467				✓									✓		✓			102205
	4468			✓										✓		✓			083600
	4469							App						✓		✓			101054
	4470	✓												✓		✓			092538
	4471	✓												✓	✓				093245
	4472						dup							✓	✓				101137
	4475					✓								✓		✓			056455
	4476	✓												✓	✓				041709
	4477		✓											✓	✓				105245
USGV	4478				✓									✓			Fit hip	008763	
31																			
32																			
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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)
[Redacted Signature]

PRESIDIO PORT / HORSE EXPORT

Name and Address of Remitter:

Beltex Corporation
2180 CR 120
Morton, Texas 79346

Service Date

Begin: 3-23-2011

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	
1	HC T1117508	\$52.00	(30hd) 1	\$52.00
2	HC T1117509	\$52.00	(31hd) 1	\$52.00
3	HC T1117510	\$52.00	(30hd) 1	\$52.00
4	HC T1117511	\$52.00	(30hd) 1	\$52.00
5				
6				
TOTAL DUE				\$208.00

Payment Information

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
3/23/2011	\$208.00	On Account	751522503VA
		Check	
		CASH	
		Money Order	
		Credit Card	

480/B 7/10

**ANIMAL AND PLANT HEALTH INSPECTION SERVICES
STATEMENT OF SERVICES**

Originating Office Phone

512-383-2411

Beltex Corporation

Po Box 427

Whiteface

TX 79379

Control Number: 4801B7110

Office Id: 974801

Service Date(s)

Begin: 23-MAR-11

End: 23-MAR-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759748177 0250	52.00	4.00	208.00

Total Due \$ 208.00

Remarks: Health Certificate # T1117508, 7509, 7510, 7511

Payment Information

Nfc Id 751522503VA

Date	Amount	Payment Type	Account/Check #
31-MAR-11	\$ 208.00	Credit Acct	

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.



Health Certificate No. 1117506
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
FROM THE UNITED STATES OF AMERICA TO MEXICO
CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

- 1. Name and Address of Exporter: **Beltex Corporation**
Nombre y Dirección del Exportador: 3801 N Grove
Fort Worth, Texas 76106
- 2. Name and Address of Importer: **Empacadora de Carnes de Fresnillo, SA de CV**
Nombre y Dirección del Importador: Avenida Plateros #480, Zona Centro
Fresnillo, Zacatecas
Mexico, C.P. 99000
- 3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/ <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>
283652	mare	144months	605908	mare	36months
030566	mare	36months	079594	gelding	144months
067160	mare	144months	601769	mare	120months
604351	mare	36months	097679	mare	120months
290317	gelding	72months	961759	mare	132months
601733	mare	132months	602600	mare	108months
601664	mare	96months	060720	gelding	120months
101394	mare	120months	042615	mare	24months

Mexico, Slaughter horse HC

3/22/11



Health Certificate No. 1117506
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
090384	mare	24months	084678	gelding	24months
092346	mare	120months	059865	gelding	144months
094588	gelding	48months	088998	gelding	144months
055221	mare	12months	087436	mare	24months
075715	mare	84months	094807	gelding	48months
055211	gelding	36months	054952	mare	36months
100643	mare	72months	101168	mare	24months

Total: 30hd

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección March 17, 2011

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

CUB

AFFIDAVIT
DECLARACIÓN JURADA

I (print) ^{(b)(6)} [redacted] - Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 7117506 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número 7117506 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metihuracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter ^{(b)(6)} [redacted] 3/19/2011
Fecha y firma del exportador

Date and signature of the Notary Public Mike Box 3/19/2011
Fecha y firma del Notario Público



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.

71117506
FORM APPROVED PEN
OMB NO. 0579-0160
23

R1

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

(b)(6)
DATE 3-21-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
Morton Texas
HD-30

(b)(6)
STREET ADDRESS
2170 CR 120
CITY, STATE, ZIP CODE
Morton Texas 79346
AREA CODE & TELEPHONE NO.
(817) 525-4221

NAME OF AUCTION/MARKET
CONSIGNEE (RECEIVER/DESTINATION) NAME
Balza Cattle Co
STREET ADDRESS
Cattle Drive
CITY, STATE, ZIP CODE
Pleasant Tx
AREA CODE & TELEPHONE NO.
(626) 453-1001

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				
WGV			✓											✓	✓			Archie	283652
														✓	✓				605908
														✓	✓				030566
														✓	✓				079594
			✓											✓	✓				067160
														✓	✓				601769
														✓	✓				604351
														✓	✓				097679
														✓	✓				290317
			✓											✓	✓				961759
			✓											✓	✓				601733
			✓											✓	✓				602600
														✓	✓				601664
														✓	✓				060720
WGV														✓	✓			Archie	101394

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

SIGNATURE (b)(6)

I HEREBY CERTIFY THAT THE INFORMATION IN THIS FORM 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 _____

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FORM APPROVED
OMB NO.
0579-0160

77117506

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

(Please type or print in ink)

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				
WSGV							DWAR											Am Lip	042615
																			090584
																			084678
																			092346
																			059865
																			094588
																			088998
																			055221
																			087436
																			075715
																			094807
																			055211
																			054952
																			100643
WSGV																		Am Lip	101168
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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 (b)(6)

This form is true and correct to the best of my knowledge.



Health Certificate No. T1117506
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

cuB

(Delete as appropriate /Remueva lo que no aplique)

5. [Within 5 days prior to export, the animals were dipped in coumaphos at 400 ppm. Spraying of the product is only authorized using a motor pump with coumaphos at 400 ppm.] [The animals were treated with ivermectin (NOM-019-ZOO-1994)]

[Los animales fueron tratados dentro de los 5 días previos al embarque con un baño de inmersión con coumaphos a concentración de 400 ppm. Solamente se autoriza el baño de aspersión cuando se utilice bomba de motor y se aplique una dosis de 400 ppm de coumaphos] [Los animales fueron tratados con ivermectina (NOM-019-ZOO-i994)]

Chris Larson, D.V.M.
Name of Accredited Veterinarian
Nombre del Médico Veterinario
Acreditado

WHPDOWN DVM
Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario
Federal que endosa.

(b)(6)

3-17-11

Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado
y Fecha

(b)(6)

3-22-11

Signature of Endorsing Federal Veterinarian
and Date
Firma del Médico Veterinario que endosa
y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).



Health Certificate No. 7112507
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter: Beltex Corporation
 Nombre y Dirección del Exportador: 3801 N Grove
 Fort Worth, Texas 76106
2. Name and Address of Importer: Empacadora de Carnes de Fresnillo, SA de CV
 Nombre y Dirección del Importador: Avenida Plateros #480, Zona Centro
 Fresnillo, Zacatecas
 Mexico, C.P. 99000
3. Identification of the animals to be exported / Identificación de los animales a ser exportados.

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/Edad aproximada
010961	mare	24months	008108	mare	48months
985841	gelding	36months	011034	gelding	24months
025091	mare	84months	010096	mare	24months
018482	mare	72months	996863	mare	84months
005504	mare	96months	005994	mare	120months
022249	gelding	84months	005618	mare	48months
007173	gelding	36months	009368	mare	48months
007459	gelding	144months	999057	gelding	12months

Mexico, Slaughter horse HC



Health Certificate No. 7117507
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
988422	gelding	120months	007571	mare	84months
002816	mare	120months	001397	gelding	96months
000643	mare	120months	987596	gelding	108months
007122	mare	60months	011655	mare	120months
007366	mare	96months	005702	mare	144months
985068	mare	48months	025088	mare	108months
006157	mare	96months			

Total: 29hd

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección March 17, 2011

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. 1112507
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

(Delete as appropriate / Remueva lo que no aplique)

5. [Within 5 days prior to export, the animals were dipped in coumaphos at 400 ppm. Spraying of the product is only authorized using a motor pump with coumaphos at 400 ppm.] [The animals were treated with ivermectin (NOM-019-ZOO-1994)]

[Los animales fueron tratados dentro de los 5 días previos al embarque con un baño de inmersión con coumaphos a concentración de 400 ppm. Solamente se autoriza el baño de aspersion cuando se utilice bomba de motor y se aplique una dosis de 400 ppm de coumaphos] [Los animales fueron tratados con ivermectina (NOM-019-ZOO-i994)]

Chris Larson, D.V.M.
Name of Accredited Veterinarian
Nombre del Médico Veterinario
Acreditado

W H BROWN DVM
Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario
Federal que endosa.

(b)(6)

3-17-11

Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado
y Fecha

(b)(6)

3-22-11

Signature of Endorsing Federal Veterinarian
and Date
Firma del Médico Veterinario que endosa
y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).

**AFFIDAVIT
DECLARACIÓN JURADA**

I (print) ^{(b)(6)} [redacted] BelTex Corp declare that the horses included in this shipment and accompanied by the health certificate number TU17507 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número TU17507 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

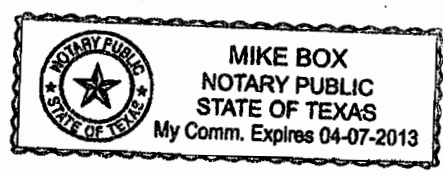
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter ^{(b)(6)} [redacted] 3/19/2011
Fecha y firma del exportador

Date and signature of the Notary Public Mike Box 3/19/2011
Fecha y firma del Notario Público



R2

**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.

7117507
FORM APPROVED
OMB NO. 0579-0160
PEN 25

TIME HORSES LOADED ON CONVEYANCE 2:00 PM	DATE 3-21-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Morton Texas
CONSIGNEE (OWNER/SHIPPER) NAME (b)(6)		NAME OF AUCTION/MARKET H029
CONSIGNEE (RECEIVER/DESTINATION) NAME Bauer Cattle Co		
STREET ADDRESS 2180 CR 120		STREET ADDRESS Cattle Drive
CITY, STATE, ZIP CODE Morton Texas 79346		CITY, STATE, ZIP CODE Presidio TX
AREA CODE & TELEPHONE NO. (806) 525-4221		AREA CODE & TELEPHONE NO. (626) 453-1001

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	USGV	4152						BRN											And	010961
2		4153																		008108
3		4154						APP												985841
4		4155						BRN												011034
5		4156																		025091
6		4157																		010096
7		4158																		018482
8		4159																		996863
9		4160																		065504
10		4161																		005994
11		4162																		022249
12		4163																		005618
13		4164						PAL												007173
14		4165																		009368
15	USGV	4166																	And	007459

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

SIGNATURE
(b)(6)

I HEREBY CERTIFY THAT 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) 37

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____
DATE _____
TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____
DATE _____
TIME _____



Health Certificate No. **7117504D**
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO**
**CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptara este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El numero de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptara machos sin castrar ni monorchideos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

Rio Grand Classic Livestock
 11870 Gateway East
 El Paso, Texas 79927

2. Name and Address of Importer:

Nombre y Dirección del Importador:

Empacadora Y Ganadera de Camargo S.A. de C.V.
 Carretera Pan Americana KM 64
 Col. Agricola Industrial
 Cd. Camargo, Chihuahua, Mexico 33750

3. Identification of the animals to be exported / Identificación de los animales a ser exportados.

Microchip number/ <i>Nombre de microchip</i>	Sex / <i>Sexo</i>	Appropriate age/ <i>Edad</i> <i>aproximada</i>	Microchip number/ <i>Nombre de microchip</i>	Sex / <i>Sexo</i>	Appropriate age/ <i>Edad</i> <i>aproximada</i>
985170001096734 USFU4631	FEMALE	120 months	985170001102581 USFU4639	GELDING	84 months
985170001062078 USFU4632	GELDING	96 months	985170001062430 USFU4640	FEMALE	60 months
985170001095885 USFU4633	FEMALE	96 months	985170001099044 USFU4641	GELDING	60 months
985170001044054 USFU4634	FEMALE	120 months	985170001041887 USFU4642	FEMALE	144 months
985170001101081 USFU4635	GELDING	168 months	985170001100668 USFU4643	GELDING	180 months
985170001040811 USFU4636	FEMALE	108 months	985170001040728 USFU4644	FEMALE	96 months
985170001053094 USFU4637	FEMALE	96 months	985170001062526 USFU4645	FEMALE	120 months
985170001093434 USFU4638	FEMALE	120 months	985170001042701 USFU4646	GELDING	72 months

Mexico Slaughter horses HC

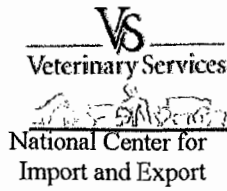
3/22/11



Health Certificate No. 7117504
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number/ Nombre de microchip	Sex / Sexo	Appropriate age/ Edad aproximada	Microchip number/ Nombre de microchip	Sex / Sexo	Appropriate age/ Edad aproximada
985170001105726 USFU4647	FEMALE	180 months	985170001061087 USFU4654	FEMALE	72 months
985170001059729 USFU4648	GELDING	96 months	985170001091987 USFU4655	FEMALE	108 months
985170001041618 USFU4649	GELDING	168 months	985170001054311 USFU4656	FEMALE	36 months
985170001098714 USFU4650	FEMALE	96 months	985170001101898 USFU4657	GELDING	144 months
985170001082048 USFU4651	GELDING	240 months	985170001087731 USFU4658	FEMALE	48 months
985170001100790 USFU4652	GELDING	108 months	985170001059363 USFU4659	FEMALE	72 months
985170001040379 USFU4653	FEMALE	120 months	985170001054119 USFU4660	FEMALE	108 months
			985170001061320 USFU4661	FEMALE	60months

Mexico Slaughter horses HC



Health Certificate No. T1117504
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
 Inspection date / Fecha de inspección 03/21/2011

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. 71127504
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

cuB

(Delete as appropriate / Remueva lo que no aplique)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus spp ticks.]

[Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.]

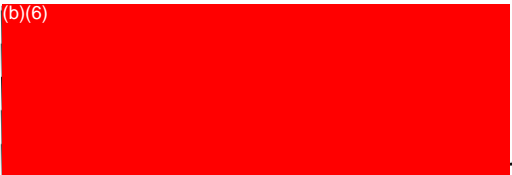
CRYSTAL VAN LOM

Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

WETSTOWN DVM

Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)



3/21/11

Signature of Accredited Veterinarian and Date
*Firma del Médico Veterinario Acreditado
y Fecha*

(b)(6)



3-22-11

Signature of Endorsing Federal Veterinarian
and Date
*Firma del Médico Veterinario que endosa
y Fecha*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.)*

AFFIDAVIT
DECLARACIÓN JURADA

(b)(6)

I (print) _____ declare that the horses included in the shipment and accompanied by the health certificate number 7117504 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número 7117504 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

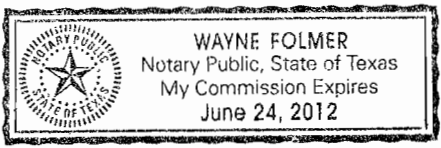
3. The following thirosthatatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

(b)(6)

Date and signature of the exporter _____ 3-21-11
Fecha y firma del exportador

Date and signature of the Notary Public _____ 3-21-11
Fecha y firma del Notario Público



**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

71127504

TIME HORSES LOADED ON CONVEYANCE 7:0 PM	DATE 3/21/11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE El Paso, TX
(b)(6) OWNER'S NAME	NAME OF AUCTION/MARKET Rio Grand Classic Livestock Auction	
CONSIGNOR (OWNER/SHIPPER) NAME Rio Grand Classic Livestock Auction	CONSIGNEE (RECEIVER/DESTINATION) NAME Empacadora y Ganadera del Amargo SA de CV	
STREET ADDRESS 11870 Gate way East	STREET ADDRESS Carretera Pan Americana 64	
CITY, STATE, ZIP CODE El Paso TX 79927	CITY, STATE, ZIP CODE Cdo Camargo, Chihuahua, Mexico 33750	
AREA CODE & TELEPHONE NO. 915 858 0590	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	USFU 4631	X							X					X					98517000 096734
2	USFU 4632	X						X								X			985170001 062078
3	USFU 4633						White					Mide	X						985170001 095885
4	USFU 4634	X							X				X						985170001 044054
5	USFU 4635						Rom		X							X			985170001 101081
6	USFU 4636		X						X				X						985170001 040811
7	USFU 4637						White		X				X						985170001 053094
8	USFU 4638						Brown		X				X						985170001 093434
9	USFU 4639			X				X								X			985170001 102581
10	USFU 4640						Rom		X				X						985170001 062430
11	USFU 4641	X							X							X			985170001 099044
12	USFU 4642		X						X				X						985170001 041887
13	USFU 4643						Pal		X							X			985170001 100668
14	USFU 4644			X					X				X						985170001 040728
15	USFU 4645		X						X				X						985170001 062526

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

SIGNATURE OF OWNER/SHIPPER
(b)(6)

I HEREBY DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE OWNER/SHIPPER 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 and belief)

(b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____
DATE _____
TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____
DATE _____
TIME _____

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

7117504

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

(Please type or print in Ink)

	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	USFU	4646	X														X		985170001 042701
17	USFU	4647		X													X		985170001 105726
18	USFU	4648					X											X	985170001 059729
19	USFU	4649	X															X	985170001 041818
20	USFU	4650				X							Punt	X					985170001 090714
21	USFU	4651						White										X	985170001 082048
22	USFU	4652					X											X	985170001 100790
23	USFU	4653	X															X	985170001 040379
24	USFU	4654					X											X	985170001 061087
25	USFU	4655					X											X	985170001 091887
26	USFU	4656					X											X	985170001 054311
27	USFU	4657					X											X	985170001 101898
28	USFU	4658					X											X	985170001 087731
29	USFU	4659				X							Punt	X				X	985170001 059363
30	USFU	4660					X											X	985170001 054119
31	USFU	4661	X															X	985170001 061320
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)



Health Certificate No. **7117525**
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptara este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El numero de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptara machos sin castrar ni monorchideos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

Rio Grand Classic Livestock
 11870 Gateway East
 El Paso, Texas 79927

2. Name and Address of Importer:

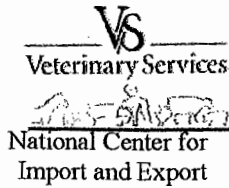
Nombre y Dirección del Importador:

Empacadora Y Ganadera de Camargo S.A. de C.V.
 Carretera Pan Americana KM 64
 Col. Agricola Industrial
 Cd. Camargo, Chihuahua, Mexico 33750

3. Identification of the animals to be exported / Identificación de los animales a ser exportados.

Microchip number/ <i>Nombre de microchip</i>	Sex / <i>Sexo</i>	Appropriate age/ <i>Edad aproximada</i>	Microchip number/ <i>Nombre de microchip</i>	Sex / <i>Sexo</i>	Appropriate age/ <i>Edad aproximada</i>
985170001060915 USFU4601	FEMALE	36 months	985170001042387 USFU4609	FEMALE	72 months
985170001053283 USFU4602	GELDING	72 months	985170001102577 USFU4610	GELDING	60 months
985170001102398 USFU4603	FEMALE	60 months	985170001084713 USFU4611	GELDING	108 months
985170001086928 USFU4604	GELDING	60 months	985170001086218 USFU4612	FEMALE	120 months
985170001096443 USFU4605	GELDING	132 months	985170001102605 USFU4613	GELDING	96 months
985170001062256 USFU4606	FEMALE	84 months	985170001093571 USFU4614	FEMALE	96 months
985170001043519 USFU4607	FEMALE	84 months	985170001100849 USFU4615	GELDING	72 months
985170001102554 USFU4608	FEMALE	144 months	985170001040791 USFU4616	FEMALE	108 months

Mexico Slaughter horses HC



Health Certificate No. 77117505
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

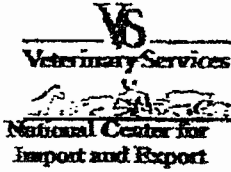
Inspection date / Fecha de inspección 03/21/2011

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. 7117505
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

(Delete as appropriate / *Remueva lo que no aplique*)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.]

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*]

CRYSTAL VAN LOM
Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

W H BROWN DVM
Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)

(b)(6)

3/21/11

3-22-11

Signature of Accredited Veterinarian and Date
*Firma del Médico Veterinario Acreditado
y Fecha*

Signature of Endorsing Federal Veterinarian
and Date
*Firma del Médico Veterinario que endosa
y Fecha*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

AFFIDAVIT
DECLARACIÓN JURADA

(b)(6)

I (print) (b)(6) declare that the horses included in this (b)(6) accompanied by the health certificate number 7117505 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número 7117505 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter
Fecha y firma del exportador

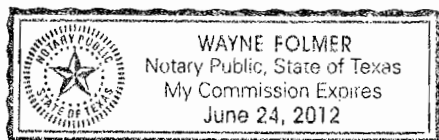
(b)(6)

3-21-11

Date and signature of the Notary Public
Fecha y firma del Notario Público

W.C. Folmer

3-21-11



**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

71117508

TIME HORSES LOADED ON CONVEYANCE 7:00 P.M.	DATE 3/21/11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE EL PASO, TEXAS
(b)(6) NAME	NAME OF AUCTION/MARKET RIO GRAND CLASSIC L/S AUCTION	
CONSIGNOR (OWNER/SHIPPER) NAME RIO GRAND CLASSIC LIVESTOCK AUCTION	CONSIGNEE (RECEIVER/DESTINATION) NAME EMPACADORA Y GANADERA de CAMARGO S.A. de C.V.	
STREET ADDRESS 11870 GATEWAY EAST	STREET ADDRESS CARRETERA PAN AMERICANA 64	
CITY, STATE, ZIP CODE EL PASO, TEXAS 79927	CITY, STATE, ZIP CODE CD. CAMARGO, CHIHUAHUA, MEXICO 33750	
AREA CODE & TELEPHONE NO. 915-858-0590	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	USFU	4601						PAL						PAINT	X				985170001060915
2	USFU	4602						BROWN	X								X		985170001053283
3	USFU	4603				X				X					X				985170001102398
4	USFU	4604			X					X							X		985170001086928
5	USFU	4605	X							X							X		985170001096443
6	USFU	4606						BROWN		X					X				985170001062256
7	USFU	4607	X							X					X				985170001043519
8	USFU	4608				X							MULE	X					985170001102554
9	USFU	4609	X						X					X					985170001042387
10	USFU	4610					X		X								X		985170001102577
11	USFU	4611					X		X								X		985170001084713
12	USFU	4612	X							X					X				985170001086218
13	USFU	4613						BROWN		X							X		985170001102605
14	USFU	4614						BROWN		X					X				985170001093571
15	USFU	4615	X							X							X		985170001100849

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

SIGNATURE

(b)(6)

I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND THE INFORMATION IN THIS FORM AND I AGREE TO CLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS THE PROPERTY OF 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

71117505

	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	USFU	4616						BROWN		X				X				985170001040791
17	USFU	4617	X							X							X	985170001061386
18	USFU	4618					X			X						X		985170001059438
19	USFU	4619						BROWN		X						X		985170001101301
20	USFU	4620						BROWN		X						X		985170001101548
21	USFU	4621	X							X						X		985170001059229
22	USFU	4622						BROWN		X				X				985170001100603
23	USFU	4623					X			X				X				985170001087922
24	USFU	4624					X			X				X				985170001061215
25	USFU	4625	X							X						X		985170001054243
26	USFU	4626		X						X						X		985170001059807
27	USFU	4627	X							X						X		985170001095047
28	USFU	4628			X					X						X		985170001061402
29	USFU	4629					X			X				X				985170001053815
30	USFU	4630					X			X				X				985170001101193
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).

SIG (b)(6) (I certify that the information contained in this form is true and correct to the best of my knowledge.)

VS
(SE

(b)(6)

20135

DATE 3-21-11

35-1054/1130
17329

(b)(6) TX (b)(6)

PAY TO THE ORDER OF U. S. D. A.

\$ 104.⁰⁰

One Hundred Four Dollars & 00/100

DOLLARS

Security Features Printed on Back.

BBVA Compass

Compass Bank
El Paso, TX

(b)(6)

FOR Health Paper

(b)(4)

Code	Description	Unit Cost	# of Units	Total Dollars
1	HCT 1117504	\$52.00	(31hd) 1	\$52.00
2	HCT 1117505	\$52.00	(30hd) 1	\$52.00
3				
4				
5				
6				
Total Due				\$104.00

Payment Information

Date	Amount	Payment Type	Account / Check #
		On Account	
3/22/2011	\$104.00	Check	20135
		CASH	
		Money Order	
		Credit Card	

4801B 7094

PRESIDIO I PORT / HORSE EXPORT

Name and Address of Remitter:

Service Date

(b)(6)

3/22/2011

(b)(6) exas (b)(6)

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	<u>Total Dollars</u>
1	HCT 1117504	\$52.00	(31hd) 1	\$52.00
2	HCT 1117505	\$52.00	(30hd) 1	\$52.00
3				
4				
5				
6				
Total Due				\$104.00

Payment Information

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
		On Account	
3/22/2011	\$104.00	Check	20135
		CASH	
		Money Order	
		Credit Card	

4801B 7094

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

Originating Office Phone

512-383-2411

(b)(6)

(b)(6) TX (b)(6)

Control Number: 4801B7094

Office Id: 974801

Service Date(s)

Begin: 22-MAR-11

End: 22-MAR-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759748177 0250	52.00	2.00	104.00

Total Due \$ 104.00

Remarks: Health Certificate # T1117504, 7505

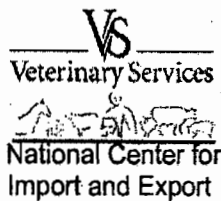
Payment Information

Nfc Id 999999999V

Date	Amount	Payment Type	Account/Check #
31-MAR-11	\$ 104.00	Check	20135

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.



Health Certificate No. 2117526
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

CUB

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MÉXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

Double JJ Horse Co
 2621 W 116th St
 Perkins, OK 74059

2. Name and Address of Importer:

Nombre y Dirección del Importador:

Alvarado Cattle Co/Inter Meats S.A.de C.V.
 Av. Universidad #602-19
 Fracc Unidad Gandara
 Aguascalientes, Ags. CP 20130

3. Identification of the animals to be exported / Identificación de los animals a ser exportados.

Microchip number/ Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip number/ Número de microchip	Sex/Sexo	Approximate age/Edad aproximada
981020005341753 USGW 4151	Mare	96 Months	981020005358293 USGW 4159	Gelding	60 Months
981020005341886 USGW 4152	Mare	108 Months	981020005349756 USGW 4160	Gelding	24 Months
981020005339471 USGW 4153	Mare	48 Months	981020005346897 USGW 4161	Mare	60 Months
981020005349160 USGW 4154	Mare	96 Months	981020005360413 USGW 4162	Mare	144 Months
981020005357031 USGW 4155	Mare	132 Months	981020005355886 USGW 4163	Mare	96 Months
981020005354979 USGW 4156	Gelding	48 Months	981020005329414 USGW 4164	Gelding	84 Months
981020005354809 USGW 4157	Gelding	72 Months	981020005333551 USGW 4165	Gelding	108 Months
981020005339689 USGW 4158	Gelding	36 Months	981020005333812 USGW 4166	Gelding	72 Months

Mexico, Slaughter horse HC

PG 1
 (Bww)

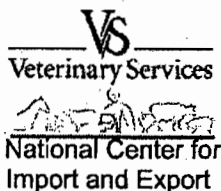
3/23/11



Health Certificate No. 711256
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Cub

Microchip number/ Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip number/ Número de microchip	Sex/Sexo	Approximate age/Edad aproximada
981020005351409 USGW 4167	Gelding	24 Months	981020005337977 USGW 4185	Gelding	108 Months
981020005355496 USGW 4168	Mare	48 Months	981020005342881 USGW 4186	Mare	96 Months
981020005350639 USGW 4169	Mare	132 Months	981020005350736 USGW 4187	Gelding	132 Months
981020005336544 USGW 4170	Gelding	36 Months	981020005357977 USGW 4188	Mare	36 Months
981020005346335 USGW 4171	Mare	60 Months	981020005359542 USGW 4189	Gelding	72 Months
981020005340869 USGW 4172	Mare	96 Months	981020005360817 USGW 4190	Mare	84 Months
981020005328606 USGW 4173	Mare	108 Months	XXXXXX	X	X
981020005337062 USGW 4174	Mare	84 Months	XXXXXX	X	X
981020005349004 USGW 4175	Mare	96 Months	XXXXXX	X	X
981020005349063 USGW 4176	Mare	36 Months	XXXXXX	X	X
981020005352415 USGW 4177	Mare	108 Months	XXXXXX	X	X
981020005340613 USGW 4178	Gelding	84 Months	XXXXXX	X	X
981020005335959 USGW 4179	Gelding	24 Months	XXXXXX	X	X
981020005339857 USGW 4180	Gelding	72 Months	XXXXXX	X	X
981020005339776 USGW 4181	Gelding	96 Months	XXXXXX	X	X
981020005331932 USGW 4182	Mare	48 Months	XXXXXX	X	X
981020005356347 USGW 4183	Mare	84 Months	XXXXXX	X	X
981020005346484 USGW 4184	Gelding	24 Months	XXXXXX	X	X



Health Certificate No. 211276
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección 3-07-11

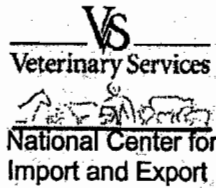
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

BW



Health Certificate No. 10754
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

cusB

5. The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.
Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.

Bret W. White, DVM
Name of Accredited Veterinarian
Nombre del Médico Veterinario Acreditado

W A BROWN DVM
Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario Federal que endosa.

(b)(6) [Redacted]
3-7-11
Signature of Accredited veterinarian and Date
Firma del Médico Veterinario Acreditado y (Fecha)

(b)(6) [Redacted]
3-23-11
Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario Acreditado y (Fecha)

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).*

CUB

(b)(6)

NOTARY PUBLIC
JURADA

I (print) _____ declare that the horses included in this shipment and accompanied by the health certificate number 7117516 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número 7117516 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatatics were not used: thiouracil, methyliuracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y pro

Date and signature of the exportador
Fecha y firma del exportador

(b)(6)

5/14/11

Date and signature of the Notary Public
Fecha y firma del Notario Público

Nicole White 3/8/11



**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

T1117516

TIME HORSES LOADED ON CONVEYANCE

1500

DATE

3-22-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

NAME OF AUCTION/MARKET

Perkins Ranch

CONSIGNEE (RECEIVER/DESTINATION) NAME

Alvarado Cattle Co

Double JJ Horse Co

STREET ADDRESS

2621 W 116th Street

STREET ADDRESS

1600 Cattle Dr

CITY, STATE, ZIP CODE

Perkins OK

CITY, STATE, ZIP CODE

Presidio TX

AREA CODE & TELEPHONE NO.

405 547.8337

AREA CODE & TELEPHONE NO.

432 295 1095

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	USGW 4151	X												X			96 MONTHS	981020005341753
2	USGW 4152	X										X			X		108 MONTHS	981020005341886
3	USGW 4153	X										X			X		48 MONTHS	981020005339471
4	USGW 4154	X										X			X		96 MONTHS	981020005349160
5	USGW 4155	X										X			X		132 MONTHS	981020005357031
6	USGW 4156	X														X	48 MONTHS	981020005354979
7	USGW 4157	X										X				X	72 MONTHS	981020005354809
8	USGW 4158	X										X				X	36 MONTHS	981020005339689
9	USGW 4159	X										X				X	60 MONTHS	981020005358293
10	USGW 4160	X										X				X	24 MONTHS	981020005349756
11	USGW 4161			X											X		60 MONTHS	981020005346897
12	USGW 4162			X								X			X		144 MONTHS	981020005360413
13	USGW 4163			X								X			X		96 MONTHS	981020005355886
14	USGW 4164			X												X	84 MONTHS	981020005329414
15	USGW 4165			X								X				X	108 MONTHS	981020005333551

HORSES (b)(6) FOR A MINIMUM OF 6 CONSECUTIVE HOURS

FOR A MINIMUM OF 6 CONSECUTIVE HOURS

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____

DATE _____

TIME _____

SIGNATURE

I HEREBY COMPLETE USING A \$10,000

STATEMENT AND THE INFORMATION IN IT AS VALIDATION OF THIS FORM OR KNOWINGLY MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR BOTH (18 U.S.C. SECTION 1001).

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

SIGNATURE OF OWNER (b)(6) the best of my knowledge

in this form is true and correct to

EST. _____

DATE _____

TIME _____

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

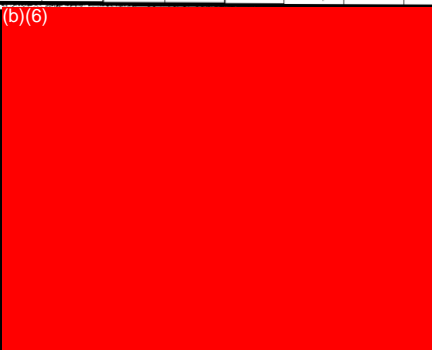
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FORM
APPROVED
OMB NO.
0579-0160

7117526

	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	USGW	4166			X							X					X	72 MONTHS	981020005333812	
17	USGW	4167			X							X						X	24 MONTHS	981020005351409
18	USGW	4168				X						X			X				48 MONTHS	981020005355496
19	USGW	4169				X						X			X				132 MONTHS	981020005350639
20	USGW	4170				X						X					X		36 MONTHS	981020005336544
21	USGW	4171					X					X			X				60 MONTHS	981020005346335
22	USGW	4172					X					X			X				96 MONTHS	981020005340869
23	USGW	4173					X					X			X				108 MONTHS	981020005328606
24	USGW	4174					X					X			X				84 MONTHS	981020005337062
25	USGW	4175					X					X			X				96 MONTHS	981020005349004
26	USGW	4176					X								X				36 MONTHS	981020005349063
27	USGW	4177					X								X				108 MONTHS	981020005352415
28	USGW	4178					X					X					X		84 MONTHS	981020005340613
29	USGW	4179					X					X					X		24 MONTHS	981020005335959
30	USGW	4180					X					X					X		72 MONTHS	981020005339857
31	USGW	4181					X										X		96 MONTHS	981020005339776
32	USGW	4182						X				X			X				48 MONTHS	981020005331932
33	USGW	4183						X							X				84 MONTHS	981020005356347
34	USGW	4184						X									X		24 MONTHS	981020005346484
35	USGW	4185						X				X					X		108 MONTHS	981020005337977
36	USGW	4186	X									X			X				96 MONTHS	981020005342881
37	USGW	4187	X									X					X		132 MONTHS	981020005350736
38	USGW	4188					X					X			X				36 MONTHS	981020005357977
39	USGW	4189					X					X					X		72 MONTHS	981020005359542
40	USGW	4190						X				X			X				84 MONTHS	981020005360817
41																				
42																				
43																				
44																				
45																				

I HEREBY AUTHORIZE THE USE OF THE INFORMATION CONTAINED ON THIS FORM FOR OFFICIAL USE ONLY. I UNDERSTAND THAT ANY UNLAWFUL DISCLOSURE OF THIS INFORMATION MAY BE CAUSAL OF IMPRISONMENT FOR UP TO 5 YEARS AND/OR A FINE OF UP TO \$10,000 OR BOTH.



SIGNATURE OF OWNER/SHIPPER

THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS INFORMATION IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR UP TO 5 YEARS OR BOTH (SECTION 1001).

I certify that the information on this form is true and correct to the best of my knowledge.

(b)(6)

88-473/1123

204

(b)(6)

TX

(b)(6)

DATE

4/23/11

PAY TO THE ORDER OF

U.S. A.A

\$ 52.00

Andrew Y. Des. of

DOLLARS



Security Features Include: Detach on Back.

Big Bend Banks

1ST PRESIDIO BANK



(b)(6)

(b)(6)

Service Date

3/23/2011

Perkins Ok 74059

Code	Description	Unit Cost	# of Units	
1	HCT1117516	\$52.00	(40hd) 1	\$52.00
2				
3				
4				
5				
6				
			Total Due	\$52.00

Payment Information

Date	Amount	Payment Type	Account / Check #
		On Account	
3/23/2011	\$52.00	Check	204
		CASH	
		Money Order	
		Credit Card	

4801B 7098

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

Originating Office Phone,
 512-383-2411

Control Number: 4801B7098
 Office Id: 974801

(b)(6)
 (b)(6) TX (b)(6)

Service Date(s)
 Begin: 23-MAR-11
 End: 23-MAR-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759748177 0250	52.00	1.00	52.00

Total Due \$ 52.00

Remarks: Helath Certificate # t1117516

Payment Information

Nfc Id 9999999999V

Date	Amount	Payment Type	Account/Check #
31-MAR-11	\$ 52.00	Check	204

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.



Health Certificate No. 2117575 ^{CWV}
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

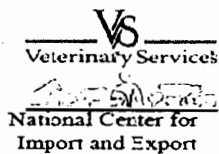
Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

- Name and Address of Exporter: (b)(6)
 Nombre y Dirección del Exportador: (b)(6) TX (b)(6)
- Name and Address of Importer: Carnicos de Jerez, S.A. de C.V.
 Nombre y Dirección del Importador: Eusebio Kino N.º. 204 Roble Norte
 Nuevo Leon, N.L. 66446
- Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USHB 1901 985170001008765	MARE	36 MONTHS	USHB 1902 985170001004837	MARE	84 MONTHS
USHB 1903 985170001027821	MARE	132 MONTHS	USHB 1904 985170001012110	MARE	60 MONTHS
USHB 1905 985170001045572	MARE	108 MONTHS	USHB 1906 985170000991622	MARE	72 MONTHS
USHB 1907 985170000995855	GELDING	120 MONTHS	USHB 1908 985170000999964	MARE	48 MONTHS
USHB 1909 985170001047206	GELDING	96 MONTHS	USHB 1910 985170001044944	GELDING	108 MONTHS
USHB 1911 985170001002184	MARE	72 MONTHS	USHB 1912 985170000989487	MARE	144 MONTHS
USHB 1913 985170001002927	GELDING	36 MONTHS	USHB 1914 985170000997371	MARE	120 MONTHS
USHB 1915 985170000992020	MARE	72 MONTHS	USHB 1916 985170001047383	MARE	96 MONTHS

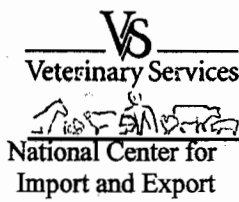
3/23/11



CU 123

Health Certificate No. 72117575
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / <i>Número de microchip</i>	Sex/ <i>Sexo</i>	Approximate age/ <i>Edad</i> <i>aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad</i> <i>aproximada</i>
USHB 1917 985170001004804	MARE	132 MONTHS	USHB 1918 985170001014797	MARE	60 MONTHS
USHB 1919 985170001027141	MARE	36 MONTHS	USHB 1920 985170001045818	GELDING	84 MONTHS
USHB 1921 985170001012597	GELDING	120 MONTHS	USHB 1922 985170001046150	GELDING	60 MONTHS
USHB 1923 985170001012343	MARE	108 MONTHS	USHB 1924 985170001029189	MARE	48 MONTHS
USHB 1925 985170000999613	MARE	72 MONTHS	USHB 1926 985170000922344	MARE	156 MONTHS
USHB 1927 985170001009805	MARE	60 MONTHS	USHB 1928 985170000998010	MARE	72 MONTHS
USHB 1929 985170001001732	MARE	144 MONTHS	USHB 1930 985170000996610	GELDING	120 MONTHS
USHB 1931 985170001046109	MARE	60 MONTHS	USHB 1932 985170001047130	MARE	96 MONTHS
USHB 1933 985170001047104	MARE	132 MONTHS			



Health Certificate No. 21117525
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

WMS

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada

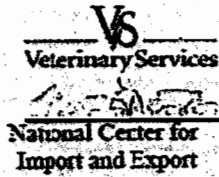
CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
 Inspection date / Fecha de inspección 03/16/2011

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. 2117575
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.]

[Los animals estan libres de ectopatasitos y provienen de areas no cuarentenadas por garrapatas Boophilus spp.]

Mitchel Jager DVM

Name of Accredited Veterinarian

Nombre del Medico Veterinario

Acreditado

W4 BROWN DVM

Name of Endorsing Federal Veterinarian

Nombre del Medico Veterinario

Federal que endosa.

(b)(6)

3/16/11

Date

Firma del Medico Veterinario Acreditado

Y Fecha

(b)(6)

3-23-11

Signature of Endorsing Federal Veterinarian

and Date

Firma del Medico Veterinario que endosa

Y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.)

(Valido Solamente si el sello veterinario del USDA esta sobre la firma del Medico Veterinario Federal).

CEAS

**AFFIDAVIT
DECLARACIÓN JURADA**

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number T117525 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número T117525 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter 02/10/20 (b)(6)
Fecha y firma del exportador

Date and signature of the Notary Public _____
Fecha y firma del Notario Público

**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

TT117515

TIME HORSES LOADED ON CONVEYANCE	DATE 03/16/2011	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Waco, TX
VEHICLE LICENSE NO. AND DRIVER'S NAME	NAME OF AUCTION/MARKET NA	
CONSIGNOR (OWNER/SHIPPER) NAME (b)(6)	CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.	
	STREET ADDRESS Eusebio Kino No. 204 Roble Norte	
STATE, ZIP CODE (b)(6) TX (b)(6)	CITY, STATE, ZIP CODE Nuevo Leon, N.L. 66446	
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	USHB	1901					X			X					X			36 MONTHS	985170001008765
2	USHB	1902					X			X					X			84 MONTHS	985170001004837
3	USHB	1903	X							X					X			132 MONTHS	985170001027821
4	USHB	1904				X				X					X			60 MONTHS	985170001012110
5	USHB	1905							PAL	X					X			108 MONTHS	985170001045572
6	USHB	1906					X			X					X			72 MONTHS	985170000991622
7	USHB	1907	X							X						X		120 MONTHS	985170000995855
8	USHB	1908				X				X					X			48 MONTHS	985170000999964
9	USHB	1909				X				X						X		96 MONTHS	985170001047206
10	USHB	1910					X			X						X		108 MONTHS	985170001044944
11	USHB	1911	X							X					X			72 MONTHS	985170001002184
12	USHB	1912	X							X					X			144 MONTHS	985170000989487
13	USHB	1913		X						X						X		36 MONTHS	985170001002927
14	USHB	1914					X			X					X			120 MONTHS	985170000997371
15	USHB	1915		X						X					X			72 MONTHS	985170000992020

HOURS (b)(6) SIGNATURE (b)(6)	FOR A MINIMUM OF 6 CONSECUTIVE HOURS.	CANADIAN FOOD INSPECTION AGENCY (CFIA) EST. _____ DATE _____ TIME _____
	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).	DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF) EST. _____ DATE _____ TIME _____
SIGNATURE (b)(6) the below signature contained in this form is true and correct to		

**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

TL17578

	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	USHB	1916					X					X				X			96 MONTHS	985170001047383
17	USHB	1917					X					X				X			132 MONTHS	985170001004804
18	USHB	1918					X					X				X			60 MONTHS	985170001014797
19	USHB	1919					X					X				X			36 MONTHS	985170001027141
20	USHB	1920	X									X						X	84 MONTHS	985170001045818
21	USHB	1921					X					X						X	120 MONTHS	985170001012597
22	USHB	1922					X					X						X	60 MONTHS	985170001046150
23	USHB	1923					X					X				X			108 MONTHS	985170001012343
24	USHB	1924	X									X				X			48 MONTHS	985170001029189
25	USHB	1925					X					X				X			72 MONTHS	985170000999613
26	USHB	1926							PAL			X				X			156 MONTHS	985170000992344
27	USHB	1927					X					X				X			60 MONTHS	985170001009805
28	USHB	1928					X					X				X			72 MONTHS	985170000998010
29	USHB	1929					X					X				X			144 MONTHS	985170001001732
30	USHB	1930					X					X						X	120 MONTHS	985170000996610
31	USHB	1931							PAL			X				X			60 MONTHS	985170001046109
32	USHB	1932							PAL			X				X			96 MONTHS	985170001047130
33	USHB	1933		X								X				X			132 MONTHS	985170001047110
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 (b)(6) [Redacted] dated in this form is true and correct to the best of my knowledge.

PRESIDIO PORT / HORSE EXPORT

Name and Address of Remitter:

Service Date

(b)(6)
Tx (b)(6)

Begin:3-23-11

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	<u>Total Dollars</u>
1	HC T1117512	\$52.00	(32hd) 1	\$52.00
2	HC T1117515	\$52.00	(33hd) 1	\$52.00
3				
4				
5				
6				
Total Due				\$104.00

Payment Information

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
		On Account	
3/23/2011	\$104.00	Check	1278
		Check	
		Money Order	
		Credit Card	

4801B7097

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

Originating Office Phone

Control Number: 4801B7097

512-383-2411

Office Id: 974801

(b)(6)

Service Date(s)

Begin: 23-MAR-11

End: 23-MAR-11

(b)(6)

(b)(6)

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759748177 0250	52.00	2.00	104.00

Total Due \$ 104.00

Remarks: Health Certificate # T1117512, 7515

Payment Information

Nfc Id
9999999999V

Date	Amount	Payment Type	Account/Check #
31-MAR-11	\$ 104.00	Check	1278

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.

(b)(6) TERS

(b)(6) TX (b)(6)

1278

3/23/2011

35-1054/1130
38301

Pay to the Order of USDA

One hundred four dollars + ^{no}/₁₀₀ \$ 104 ⁰⁰/₁₀₀

BBVA Compass

Compass Bank
Waco, TX

(b)(6)

For 2 loads

(b)(6)

Service Date

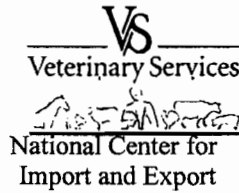
Begin: 3-23-11

Code	Description	Unit Cost	# of Units	Total Dollars
1	HCT1117512	\$52.00	(32hd) 1	\$52.00
2	HCT1117515	\$52.00	(33hd) 1	\$52.00
3				
4				
5				
6				
Total Due				\$104.00

Payment Information

Date	Amount	Payment Type	Account / Check #
		On Account	
3/23/2011	\$104.00	Check	1278
		Check	
		Money Order	
		Credit Card	

A001B7097



Health Certificate No. 7117572
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

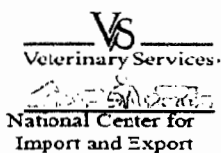
**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter: (b)(6)
 Nombre y Dirección del Exportador: (b)(6) TX (b)(6)
2. Name and Address of Importer: Camicos de Jerez, S.A. de C.V.
 Nombre y Dirección del Importador: Eusebio Kino No. 204 Roble Norte
 Nuevo Leon, N.L. 66446
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

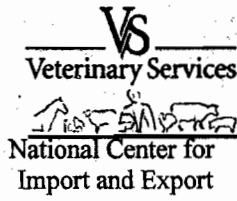
Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USHB 2351 985170001011823	MARE	132 MONTHS	USHB 2352 985170001026215	MARE	60 MONTHS
USHB 2353 985170001047459	MARE	84 MONTHS	USHB 2354 985170000995185	MARE	120 MONTHS
USHB 2355 985170001038506	MARE	96 MONTHS	USHB 2356 985170001004363	MARE	24 MONTHS
USHB 2357 985170000994441	MARE	108 MONTHS	USHB 2358 985170000993079	MARE	72 MONTHS
USHB 2359 985170001047107	MARE	36 MONTHS	USHB 2360 985170000999462	MARE	144 MONTHS
USHB 2361 985170001003627	MARE	84 MONTHS	USHB 2362 985170000994040	MARE	36 MONTHS
USHB 2363 985170001044450	MARE	60 MONTHS	USHB 2364 985170001012254	MARE	132 MONTHS
USHB 2365 985170001022652	MARE	96 MONTHS	USHB 2366 985170001027098	MARE	72 MONTHS



Health Certificate No. 71117512
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

cuB

Microchip number / Número de microchip	Sex/ Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USHB 2367 985170001014848	MARE	108 MONTHS	USHB 2368 985170001029579	MARE	48 MONTHS
USHB 2369 985170001014933	MARE	60 MONTHS	USHB 2370 98517001005814	MARE	36 MONTHS
USHB 2371 985170001029400	MARE	96 MONTHS	USHB 2372 985170001013438	GELDING	120 MONTHS
USHB 2373 985170000993235	GELDING	156 MONTHS	USHB 2374 985170001022609	MARE	108 MONTHS
USHB 2375 985170001001913	MARE	72 MONTHS	USHB 2376 985170000994565	MARE	48 MONTHS
USHB 2377 985170001011947	MARE	96 MONTHS	USHB 2378 985170000992634	MARE	72 MONTHS
USHB 2379 985170000982601	MARE	36 MONTHS	USHB 2380 985170001025232	MARE	132 MONTHS
USHB 2381 985170000985683	GELDING	84 MONTHS	USHB 2382 985170001037829	MARE	108 MONTHS



Health Certificate No. TU17072
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

cuB

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
 Inspection date / Fecha de inspección 03/22/2011

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. 7117512
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

sub

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.]
[Los animals estan libres de ectopatasitos y provienen de areas no cuarentenadas por garrapatas Boophilus spp.]

Michael James DVM

Name of Accredited Veterinarian
*Nombre del Medico Veterinario
Acreditado*

W H BROWN, DVM

Name of Endorsing Federal Veterinarian
*Nombre del Medico Veterinario
Federal que endosa.*

(b)(6) [Redacted Signature]

3/22/11

Signature of Accredited Veterinarian and Date
*Firma del Medico Veterinario Acreditado
Y Fecha*

(b)(6) [Redacted Signature]

3-23-11

Signature of Endorsing Federal Veterinarian
and Date
*Firma del Medico Veterinario que endosa
Y Fecha*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.)
(Valido Solamente si el sello veterinario del USDA esta sobre la firma del Medico Veterinario Federal).

CUA3

**AFFIDAVIT
DECLARACIÓN JURADA**

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number 7117512 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número 7117512 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter 03/22/2011 (b)(6)
Fecha y firma del exportador

Date and signature of the Notary Public _____
Fecha y firma del Notario Público

**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
2007052

TIME HORSES LOADED ON CONVEYANCE	DATE 03/22/2011	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Waco, TX
VEHICLE LICENSE NO. AND DRIVER'S NAME	NAME OF AUCTION/MARKET NA	
CONSIGNOR (OWNER/SHIPPER) NAME (b)(6)	CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.	
	STREET ADDRESS Eusebio Kino No. 204 Roble Norte	
CITY, STATE, ZIP CODE (b)(6) TX (b)(6)	CITY, STATE, ZIP CODE Nuevo Leon, N.L. 66446	
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	USHB	2351	X								X				X			132 MONTHS	985170001011823
2	USHB	2352	X								X				X			60 MONTHS	985170001026215
3	USHB	2353					X				X				X			84 MONTHS	985170001047459
4	USHB	2354						X			X				X			120 MONTHS	985170000995185
5	USHB	2355						X			X				X			96 MONTHS	985170001038506
6	USHB	2356						X			X				X			24 MONTHS	98517001004363
7	USHB	2357			X						X				X			108 MONTHS	985170000994441
8	USHB	2358			X						X				X			72 MONTHS	985170000993079
9	USHB	2359					X				X				X			36 MONTHS	985170001047107
10	USHB	2360						X			X				X			144 MONTHS	985170000999462
11	USHB	2361	X								X				X			84 MONTHS	985170001003627
12	USHB	2362	X								X				X			36 MONTHS	985170000994040
13	USHB	2363					X				X				X			60 MONTHS	985170001044450
14	USHB	2364			X						X				X			132 MONTHS	985170001012254
15	USHB	2365			X						X				X			96 MONTHS	985170001022652

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

SIGNATURE (b)(6)

I HEREBY AUTHORIZE THE OTHER 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 (b)(6) the best
The information contained in this form is true and correct to

CANADIAN FOOD INSPECTION AGENCY (CFIA)
EST. _____
DATE _____
TIME _____

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

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

225117572

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

	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	USHB	2366						X	X					X			72 MONTHS	985170001027098	
17	USHB	2367						X	X					X			108 MONTHS	985170001014848	
18	USHB	2368					X		X					X			48 MONTHS	985170001029579	
19	USHB	2369	X						X					X			60 MONTHS	985170001014933	
20	USHB	2370	X						X					X			36 MONTHS	985170001005814	
21	USHB	2371				X			X					X			96 MONTHS	985170001029400	
22	USHB	2372				X			X							X	120 MONTHS	985170001013438	
23	USHB	2373					X		X							X	156 MONTHS	985170000993235	
24	USHB	2374					X		X					X			108 MONTHS	985170001022609	
25	USHB	2375	X						X					X			72 MONTHS	985170001001913	
26	USHB	2376	X						X					X			48 MONTHS	985170000994565	
27	USHB	2377						X	X					X			96 MONTHS	985170001011947	
28	USHB	2378					X		X					X			72 MONTHS	985170000992634	
29	USHB	2379					X		X					X			36 MONTHS	985170000982601	
30	USHB	2380					X		X					X			132 MONTHS	985170001025232	
31	USHB	2381					X		X							X	84 MONTHS	985170000985683	
32	USHB	2382	X						X					X			108 MONTHS	985170001037829	
33																			
34																			
35																			
36																			
37																			
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39																			
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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 (b)(6)  in this form is true and correct to the best of my knowledge.)



Health Certificate No. 7117575
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

CW/B

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

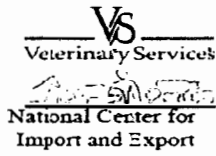
Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

- Name and Address of Exporter: (b)(6)
 Nombre y Dirección del Exportador: (b)(6) TX(b)(6)
- Name and Address of Importer: Carnicos de Jerez, S.A. de C.V.
 Nombre y Dirección del Importador: Eusebio Kino No. 204 Roble Norte
 Nuevo Leon, N.L. 66446
- Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USHB 1901 985170001008765	MARE	36 MONTHS	USHB 1902 985170001004837	MARE	84 MONTHS
USHB 1903 985170001027821	MARE	132 MONTHS	USHB 1904 985170001012110	MARE	60 MONTHS
USHB 1905 985170001045572	MARE	108 MONTHS	USHB 1906 985170000991622	MARE	72 MONTHS
USHB 1907 985170000995855	GELDING	120 MONTHS	USHB 1908 985170000999964	MARE	48 MONTHS
USHB 1909 985170001047206	GELDING	96 MONTHS	USHB 1910 985170001044944	GELDING	108 MONTHS
USHB 1911 985170001002184	MARE	72 MONTHS	USHB 1912 985170000989487	MARE	144 MONTHS
USHB 1913 985170001002927	GELDING	36 MONTHS	USHB 1914 985170000997371	MARE	120 MONTHS
USHB 1915 985170000992020	MARE	72 MONTHS	USHB 1916 985170001047383	MARE	96 MONTHS

3/23/11



Health Certificate No. 2117575
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/ Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USHB 1917 985170001004804	MARE	132 MONTHS	USHB 1918 985170001014797	MARE	60 MONTHS
USHB 1919 985170001027141	MARE	36 MONTHS	USHB 1920 985170001045818	GELDING	84 MONTHS
USHB 1921 985170001012597	GELDING	120 MONTHS	USHB 1922 985170001046150	GELDING	60 MONTHS
USHB 1923 985170001012343	MARE	108 MONTHS	USHB 1924 985170001029189	MARE	48 MONTHS
USHB 1925 985170000999613	MARE	72 MONTHS	USHB 1926 985170000922344	MARE	156 MONTHS
USHB 1927 985170001009805	MARE	60 MONTHS	USHB 1928 985170000998010	MARE	72 MONTHS
USHB 1929 985170001001732	MARE	144 MONTHS	USHB 1930 985170000996610	GELDING	120 MONTHS
USHB 1931 985170001046109	MARE	60 MONTHS	USHB 1932 985170001047130	MARE	96 MONTHS
USHB 1933 985170001047104	MARE	132 MONTHS			



Health Certificate No. TLU17575
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

CVMS

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada

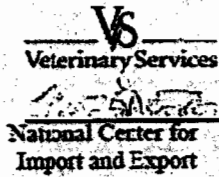
CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
 Inspection date / Fecha de inspección 03/16/2011

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. 21117575
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.]

[Los animals estan libres de ectopatasitos y provienen de areas no cuarentenadas por garrapatas Boophilus spp.]

Mitchel Jager DVM

Name of Accredited Veterinarian

Nombre del Medico Veterinario

Acreditado

W H BROWN DVM

Name of Endorsing Federal Veterinarian

Nombre del Medico Veterinario

Federal que endosa.

(b)(6) [Redacted]

3/16/11

and Date

Firma del Medico Veterinario Acreditado

Y Fecha

(b)(6) [Redacted]

3-23-11

Signature of Endorsing Federal Veterinarian

and Date

Firma del Medico Veterinario que endosa

Y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.)

(Valido Solamente si el sello veterinario del USDA esta sobre la firma del Medico Veterinario Federal).

AFFIDAVIT
DECLARACIÓN JURADA

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number T117515 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número T117515 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter 02/10/20 (b)(6)
Fecha y firma del exportador

Date and signature of the Notary Public _____
Fecha y firma del Notario Público

**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

77117515

TIME HORSES LOADED ON CONVEYANCE	DATE 03/16/2011	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Waco, TX
VEHICLE LICENSE NO. AND DRIVER'S NAME	NAME OF AUCTION/MARKET NA	
CONSIGNOR (OWNER/SHIPPER) NAME (b)(6)	CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.	
	STREET ADDRESS Eusebio Kino No. 204 Roble Norte	
CITY, STATE, ZIP CODE (b)(6) TX (b)(6)	CITY, STATE, ZIP CODE Nuevo Leon, N.L. 66446	
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.
 Horses are able to walk unassisted.
- Foals are older than 6 months of age.
 Horses are not blind in both eyes.

	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	USHB	1901					X			X					X			36 MONTHS	985170001008765
2	USHB	1902					X			X					X			84 MONTHS	985170001004837
3	USHB	1903	X							X					X			132 MONTHS	985170001027821
4	USHB	1904				X				X					X			60 MONTHS	985170001012110
5	USHB	1905						PAL		X					X			108 MONTHS	985170001045572
6	USHB	1906					X			X					X			72 MONTHS	985170000991622
7	USHB	1907	X							X							X	120 MONTHS	985170000995855
8	USHB	1908				X				X					X			48 MONTHS	985170000999964
9	USHB	1909				X				X							X	96 MONTHS	985170001047206
10	USHB	1910					X			X							X	108 MONTHS	985170001044944
11	USHB	1911	X							X					X			72 MONTHS	985170001002184
12	USHB	1912	X							X					X			144 MONTHS	985170000989487
13	USHB	1913		X						X							X	36 MONTHS	985170001002927
14	USHB	1914					X			X					X			120 MONTHS	985170000997371
15	USHB	1915		X						X					X			72 MONTHS	985170000992020

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

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

711758

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	USHB	1916					X			X				X			96 MONTHS	985170001047383
17	USHB	1917					X			X				X			132 MONTHS	985170001004804
18	USHB	1918					X			X				X			60 MONTHS	985170001014797
19	USHB	1919					X			X				X			36 MONTHS	985170001027141
20	USHB	1920	X							X						X	84 MONTHS	985170001045818
21	USHB	1921					X			X						X	120 MONTHS	985170001012597
22	USHB	1922					X			X						X	60 MONTHS	985170001046150
23	USHB	1923					X			X				X			108 MONTHS	985170001012343
24	USHB	1924	X							X				X			48 MONTHS	985170001029189
25	USHB	1925					X			X				X			72 MONTHS	985170000999613
26	USHB	1926						PAL		X				X			156 MONTHS	985170000992344
27	USHB	1927					X			X				X			60 MONTHS	985170001009805
28	USHB	1928					X			X				X			72 MONTHS	985170000998010
29	USHB	1929					X			X				X			144 MONTHS	985170001001732
30	USHB	1930					X			X						X	120 MONTHS	985170000996610
31	USHB	1931						PAL		X				X			60 MONTHS	985170001046109
32	USHB	1932						PAL		X				X			96 MONTHS	985170001047130
33	USHB	1933		X						X				X			132 MONTHS	985170001047110
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).

SIG (b)(6) [Redacted] maintained in this form is true and correct to the best of my knowledge.

PRESIDIO PORT / HORSE EXPORT

Name and Address of Remitter:

Service Date

(b)(6)

Begin:3-23-11

(b)(6) Tx (b)(6)

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	<u>Total Dollars</u>
1	HC T1117512	\$52.00	(32hd) 1	\$52.00
2	HC T1117515	\$52.00	(33hd) 1	\$52.00
3				
4				
5				
6				
Total Due				\$104.00

Payment Information

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
		On Account	
3/23/2011	\$104.00	Check	1278
		Check	
		Money Order	
		Credit Card	

AB01B7097

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

Originating Office Phone
512-383-2411

Control Number: 4801B7097
Office Id: 974801

(b)(6)
(b)(6) TX (b)(6)

Service Date(s)
Begin: 23-MAR-11
End: 23-MAR-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759748177 0250	52.00	2.00	104.00

Total Due \$ 104.00

Remarks: Health Certificate # T1117512, 7515

Payment Information

Nfc Id 9999999999V

Date	Amount	Payment Type	Account/Check #
31-MAR-11	\$ 104.00	Check	1278

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.

(b)(6) TX (b)(6)

3/23/2011

1278

35-1054/1130
38301

Pay to the Order of USDA

Date

One hundred and four dollars + ^{no}/₁₀₀ \$ 104 ⁰⁰/₁₀₀

Dollars

BBVA Compass

Compass Bank
Waco, TX

(b)(6)

For 2 loads

(b)(6)

Service Date

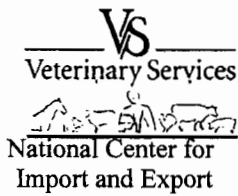
Begin: 3-23-11

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	<u>Total Dollars</u>
1	HCT1117512	\$52.00	(32hd) 1	\$52.00
2	HCT1117515	\$52.00	(33hd) 1	\$52.00
3				
4				
5				
6				
Total Due				\$104.00

Payment Information

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
		On Account	
3/23/2011	\$104.00	Check	1278
		Check	
		Money Order	
		Credit Card	

A001B7097



Health Certificate No. 7117572
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

WSD

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

(b)(6)
 (b)(6) TX (b)(6)

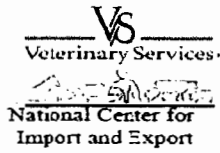
2. Name and Address of Importer:

Nombre y Dirección del Importador:

Carnicos de Jerez, S.A. de C.V.
 Eusebio Kino No. 204 Roble Norte
 Nuevo Leon, N.L. 66446

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

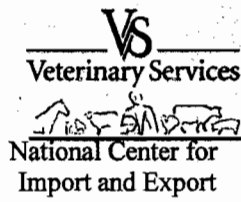
Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USHB 2351 985170001011823	MARE	132 MONTHS	USHB 2352 985170001026215	MARE	60 MONTHS
USHB 2353 985170001047459	MARE	84 MONTHS	USHB 2354 985170000995185	MARE	120 MONTHS
USHB 2355 985170001038506	MARE	96 MONTHS	USHB 2356 985170001004363	MARE	24 MONTHS
USHB 2357 985170000994441	MARE	108 MONTHS	USHB 2358 985170000993079	MARE	72 MONTHS
USHB 2359 985170001047107	MARE	36 MONTHS	USHB 2360 985170000999462	MARE	144 MONTHS
USHB 2361 985170001003627	MARE	84 MONTHS	USHB 2362 985170000994040	MARE	36 MONTHS
USHB 2363 985170001044450	MARE	60 MONTHS	USHB 2364 985170001012254	MARE	132 MONTHS
USHB 2365 985170001022652	MARE	96 MONTHS	USHB 2366 985170001027098	MARE	72 MONTHS



Health Certificate No. 71117512
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

cuB

Microchip number / <i>Número de microchip</i>	Sex/ <i>Sexo</i>	Approximate age/ <i>Edad</i> <i>aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad</i> <i>aproximada</i>
USHB 2367 985170001014848	MARE	108 MONTHS	USHB 2368 985170001029579	MARE	48 MONTHS
USHB 2369 985170001014933	MARE	60 MONTHS	USHB 2370 98517001005814	MARE	36 MONTHS
USHB 2371 985170001029400	MARE	96 MONTHS	USHB 2372 985170001013438	GELDING	120 MONTHS
USHB 2373 985170000993235	GELDING	156 MONTHS	USHB 2374 985170001022609	MARE	108 MONTHS
USHB 2375 985170001001913	MARE	72 MONTHS	USHB 2376 985170000994565	MARE	48 MONTHS
USHB 2377 985170001011947	MARE	96 MONTHS	USHB 2378 985170000992634	MARE	72 MONTHS
USHB 2379 985170000982601	MARE	36 MONTHS	USHB 2380 985170001025232	MARE	132 MONTHS
USHB 2381 985170000985683	GELDING	84 MONTHS	USHB 2382 985170001037829	MARE	108 MONTHS



Health Certificate No. 71117072
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

cuys

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
 Inspection date / Fecha de inspección 03/22/2011

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. 71117512
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.]

[Los animals estan libres de ectopatasitos y provienen de areas no cuarentenadas por garrapatas Boophilus spp.]

Mitchel Jones DVM

Name of Accredited Veterinarian

Nombre del Medico Veterinario

Acreditado

W H BROWN, DVM

Name of Endorsing Federal Veterinarian

Nombre del Medico Veterinario

Federal que endosa.

(b)(6) 

3/22/11

Firma del Medico Veterinario Acreditado

Y Fecha

(b)(6) 

3-23-11

Signature of Endorsing Federal Veterinarian
and Date

Firma del Medico Veterinario que endosa

Y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.)

(Valido Solamente si el sello veterinario del USDA esta sobre la firma del Medico Veterinario Federal).

CAH3

**AFFIDAVIT
DECLARACIÓN JURADA**

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number 7117512 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número 7117512 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter 03/22/2011 (b)(6)
Fecha y firma del exportador

Date and signature of the Notary Public _____
Fecha y firma del Notario Público

**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
20117572

TIME HORSES LOADED ON CONVEYANCE	DATE 03/22/2011	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Waco, TX
VEHICLE LICENSE NO. AND DRIVER'S NAME	NAME OF AUCTION/MARKET NA	
CONSIGNOR (OWNER/SHIPPER) NAME (b)(6)	CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.	
	STREET ADDRESS Eusebio Kino No. 204 Roble Norte	
CITY, STATE, ZIP CODE (b)(6) TX (b)(6)	CITY, STATE, ZIP CODE Nuevo Leon, N.L. 66446	
AREA CODE & TELEPHONE NO. (254)366-5229	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	USHB	2351	X								X					X			132 MONTHS	985170001011823
2	USHB	2352	X								X					X			60 MONTHS	985170001026215
3	USHB	2353						X			X					X			84 MONTHS	985170001047459
4	USHB	2354							X		X					X			120 MONTHS	985170000995185
5	USHB	2355							X		X					X			96 MONTHS	985170001038506
6	USHB	2356							X		X					X			24 MONTHS	98517001004363
7	USHB	2357			X						X					X			108 MONTHS	985170000994441
8	USHB	2358			X						X					X			72 MONTHS	985170000993079
9	USHB	2359						X			X					X			36 MONTHS	985170001047107
10	USHB	2360							X		X					X			144 MONTHS	985170000999462
11	USHB	2361	X								X					X			84 MONTHS	985170001003627
12	USHB	2362	X								X					X			36 MONTHS	985170000994040
13	USHB	2363						X			X					X			60 MONTHS	985170001044450
14	USHB	2364			X						X					X			132 MONTHS	985170001012254
15	USHB	2365			X						X					X			96 MONTHS	985170001022652

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

SIGNATURE (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 (b)(6) certifies that the information contained in this form is true and correct to the best of his knowledge.

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

22517572

	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	USHB	2366						X	X					X			72 MONTHS	985170001027098
17	USHB	2367						X	X					X			108 MONTHS	985170001014848
18	USHB	2368					X		X					X			48 MONTHS	985170001029579
19	USHB	2369	X						X					X			60 MONTHS	985170001014933
20	USHB	2370	X						X					X			36 MONTHS	985170001005814
21	USHB	2371				X			X					X			96 MONTHS	985170001029400
22	USHB	2372				X			X						X		120 MONTHS	985170001013438
23	USHB	2373					X		X						X		156 MONTHS	985170000993235
24	USHB	2374					X		X					X			108 MONTHS	985170001022609
25	USHB	2375	X						X					X			72 MONTHS	985170001001913
26	USHB	2376	X						X					X			48 MONTHS	985170000994565
27	USHB	2377						X	X					X			96 MONTHS	985170001011947
28	USHB	2378					X		X					X			72 MONTHS	985170000992634
29	USHB	2379					X		X					X			36 MONTHS	985170000982601
30	USHB	2380					X		X					X			132 MONTHS	985170001025232
31	USHB	2381					X		X						X		84 MONTHS	985170000985683
32	USHB	2382	X						X					X			108 MONTHS	985170001037829
33																		
34																		
35																		
36																		
37																		
38																		
39																		
40																		
41																		
42																		
43																		
44																		
45																		

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SIGNATURE (b)(6) _____ in this form is true and correct to the best of my knowledge.

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

Originating Office Phone

512-383-2411

Control Number: 4801B7095

Office Id: 974801

(b)(6)

Service Date(s)

Begin: 23-MAR-11

End: 23-MAR-11

(b)(6)

TX

(b)(6)

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759748177 0250	52.00	2.00	104.00

Total Due \$ 104.00

Remarks: Health Certificate # T1117513, 7514

Payment Information

Nfc Id
9999999999V

Date	Amount	Payment Type	Account/Check #
31-MAR-11	\$ 104.00	Check	206

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.

(b)(6)

88-473/1123

206

(b)(6) TX (b)(6)

DATE

3/23/11

PAY TO THE ORDER OF

U.S.A.A

\$ 104-

CIENTO QUATRO 04

DOLLARS

Security Features included. Details on Back.



1ST PRESIDIO BANK
P.O. BOX 2229
PRESIDIO, TEXAS 79845



(b)(6)



MP

Service Date

3/23/2011

(b)(6)

Lebanon, TN 37090

Code	Description	Unit Cost	# of Units	Total Dollars
1	HC T 1117513	\$52.00	(34hd) 1	\$52.00
2	HC T 1117514	\$52.00	(32hd) 1	\$52.00
3				
4				
5				
6				
Total Due				\$104.00

Payment Information

Date	Amount	Payment Type	Account / Check #
		On Account	
3/23/2011	\$104.00	Check	206
		CASH	
		Money Order	
		Credit Card	

480137095



Health Certificate No. T11-18253
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Page 1 of 5

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**McDaniel & Son
 1572 CR 35020
 Brookston, TX 75421**

2. Name and Address of Importer:

Nombre y Dirección del Importador:

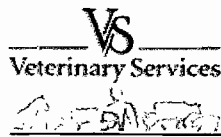
**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USFT 8101 981100002585184	Mare	108 Months	USFT 8109 981020005242104	Mare	60 Months
USFT 8102 981100002590277	Mare	84 Months	USFT 8110 981020005257432	Gelding	72 Months
USFT 8103 981020005246093	Mare	60 Months	USFT 8111 981020005245024	Mare	72 Months
USFT 8104 981020005239979	Mare	72 Months	USFT 8112 981020005235043	Mare	60 Months
USFT 8105 981020005235805	Gelding	108 Months	USFT 8113 981020005252305	Mare	72 Months
USFT 8106 981020005254603	Mare	72 Months	USFT 8114 981020005246419	Mare	72 Months
USFT 8107 981020005236069	Mare	84 Months	USFT 8115 981020005245541	Mare	84 Months
USFT 8108 981020005255935	Gelding	108 Months	USFT 8116 981020005237472	Mare	108 Months

Mexico, Slaughter horse HC

3/22/11



Health Certificate No. T11-18253
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)
Page 2 of 5

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USFT 8117 981100002589256	Gelding	108 Months	USFT 8124 981020005235178	Mare	60 Months
USFT 8118 981020005260568	Gelding	72 Months	USFT 8125 981020005257489	Mare	72 Months
USFT 8119 981020005258176	Gelding	48 Months	USFT 8126 981020005261301	Mare	108 Months
USFT 8120 981100002405780	Mare	72 Months	USFT 8127 981020005249250	Mare	120 Months
USFT 8121 981098102760812	Mare	72 Months	USFT 8128 981020005235247	Mare	144 Months
USFT 8122 981020005242047	Mare	84 Months	USFT 8129 981020005248791	Mare	108 Months
USFT 8123 981020005248408	Mare	108 Months	USFT 8130 981020005251886	Mare	60 Months

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección 3/22/11

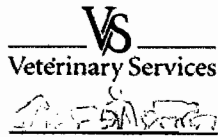
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

Identification number/Número de identificación	Sex/Sexo	Breed/Raza	Age /Edad	Color/Color
USFT 8131 981020005254253	Mare		48 Months	
Total # of Horses 31				



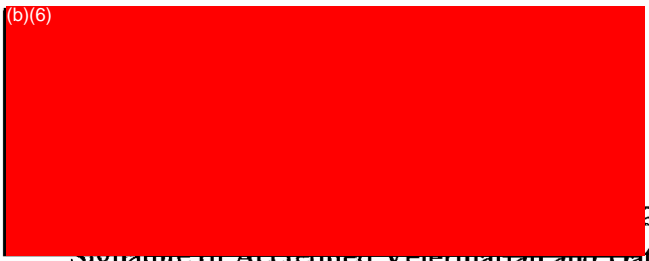
Health Certificate No. T11-18253
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)
 Page 4 of 5

(Delete as appropriate / *Remueva lo que no aplique*)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.]
 [*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*]

Name of Accredited Veterinarian
Nombre del Médico Veterinario
Acreditado Denise Fowler

Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario
Federal que endosa H.L. Vega



Signature of Accredited Veterinarian and Date
Firma del Médico Veterinario Acreditado
y Fecha

Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario que endosa
y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal*).

AFFIDAVIT
DECLARACIÓN JURADA

Page 5 of 5

I (print) ^{(b)(6)} _____ declare that the horses included in this shipment and accompanied by the health certificate number T11-18253 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número T11-18253 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

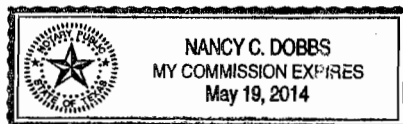
Date and signature of the exporter _____
Fecha y firma del exportador

^{(b)(6)}

March 11, 2011

Date and signature of the Notary Public _____
Fecha y firma del Notario Público

Nancy C. Dobbs, March 11, 2011



**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

T11-18253

TIME HORSES LOADED ON CONVEYANCE

DATE 3-22-1

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Brookston, Texas 75421

(b)(6)

NAME OF AUCTION/MARKET
N/A

CONSIGNEE (RECEIVER/DESTINATION) NAME

Carnicos de Jerez, S.A. de C.V.

STREET ADDRESS
1572 CR 35020

STREET ADDRESS
Carretera Jerez Sanchez Roman KM 27.5

CITY, STATE, ZIP CODE
Brookston, Texas 75421

CITY, STATE, ZIP CODE
Jerez, Zacatecas, Mexico, C.P. 99380

AREA CODE & TELEPHONE NO.
903-784-6862

AREA CODE & TELEPHONE NO.
011 52 81 81 58 1700

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. Age	REMARKS Include existing conditions Chip #	
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld			
1	USFT	8101						Pt		X				X				108	981100002585184
2	USFT	8102						Pt		X				X				84	981100002590277
3	USFT	8103						Dn		X				X				60	981020005246093
4	USFT	8104						Pt		X				X				72	981020005239979
5	USFT	8105	X							X						X		108	981020005235805
6	USFT	8106						Sr		X				X				72	981020005254603
7	USFT	8107						Pt		X				X				84	981020005236069
8	USFT	8108						Dn		X						X		108	981020005255935
9	USFT	8109			X					X				X				60	981020005242104
10	USFT	8110	X							X						X		72	981020005257432
11	USFT	8111						Sr		X				X				72	981020005245024
12	USFT	8112						Pt		X				X				60	981020005235043
13	USFT	8113	X							X				X				72	981020005252305
14	USFT	8114						Pt		X				X				72	981020005246419
15	USFT	8115						Pt		X				X				84	981020005245541

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

SIGNATURE

(b)(6)

I HEREBY AUTHORIZE THE INFORMATION IN THIS FORM TO BE USED 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 _____

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

T11-18253

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

(Please type or print in ink)

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc. Age	REMARKS Include precondition chip #		
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld				
16	USFT	8116		X									X			X			108	981020005237472
17	USFT	8117							Sr				X					X	108	981100002589256
18	USFT	8118							Sr				X					X	72	981020005260568
19	USFT	8119	X										X					X	48	981020005258176
20	USFT	8120	X										X			X			72	981100002405780
21	USFT	8121	X										X			X			72	981098102760812
22	USFT	8122	X							X						X			84	981020005242047
23	USFT	8123							Sr	X						X			108	981020005248408
24	USFT	8124							Sr		X					X			60	981020005235178
25	USFT	8125							Sr	X						X			72	981020005257489
26	USFT	8126	X							X						X			108	981020005261301
27	USFT	8127							Bn	X						X			120	981020005249250
28	USFT	8128	X								X					X			144	981020005235247
29	USFT	8129							Bn		X					X			108	981020005248791
30	USFT	8130							Sr		X					X			60	981020005251886
31	USFT	8131							Sr		X					X			48	981020005254253
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 (b)(6) [Redacted] is true and correct to the best of my knowledge.



Health Certificate No. **T11-18252**
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Page 1 of 5

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**McDaniel & Son
 1572 CR 35020
 Brookston, TX 75421**

2. Name and Address of Importer:

Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGV 4501 981100002589737	Mare	60 Months	USGV 4509 981100002576403	Mare	84 Months
USGV 4502 981100002573656	Mare	72 Months	USGV 4510 981100002574825	Mare	96 Months
USGV 4503 981100002585076	Mare	108 Months	USGV 4511 981100002571116	Mare	108 Months
USGV 4504 981100002575970	Gelding	36 Months	USGV 4512 981100002576042	Gelding	108 Months
USGV 4505 981100002574480	Mare	24 Months	USGV 4513 981100002587561	Mare	72 Months
USGV 4506 981100002574023	Mare	72 Months	USGV 4514 981100002581886	Mare	60 Months
USGV 4507 981100002576114	Mare	60 Months	USGV 4515 981100002570526	Mare	72 Months
USGV 4508 981100002579613	Mare	96 Months	USGV 4516 981100002571812	Mare	84 Months

Mexico, Slaughter horse HC



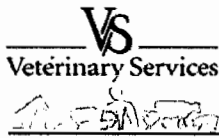
Health Certificate No. T11-18252
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Page 2 of 5

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGV 4517 981100002583803	Mare	60 Months	USGV 4524 981100002585447	Mare	60 Months
USGV 4518 981100002572310	Gelding	72 Months	USGV 4525 981100002588462	Mare	108 Months
USGV 4519 981100002577767	Mare	60 Months	USGV 4526 981100002574944	Gelding	96 Months
USGV 4520 981100002573120	Gelding	84 Months	USGV 4527 981100002574991	Gelding	72 Months
USGV 4521 981100002571335	Gelding	96 Months	USGV 4528 981100002588872	Mare	84 Months
USGV 4522 981100002578618	Mare	72 Months	USGV 4529 981100002399590	Mare	108 Months
USGV 4523 981100002572774	Mare	60 Months	USGV 4530 981100002585295	Mare	96 Months

CERTIFICATION STATEMENTS / CERTIFICACIONES

- Horses originate from the United States.
Los animales son originarios de Estados Unidos.
- Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / *Fecha de inspección* 3 / 21 / 11
- Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.
- During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-18252
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Page 4 of 5

(Delete as appropriate / *Remueva lo que no aplique*)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.]

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*]

Name of Accredited Veterinarian

Nombre del Médico Veterinario

Acreditado Denise Fowler

Name of Endorsing Federal Veterinarian

Nombre del Médico Veterinario

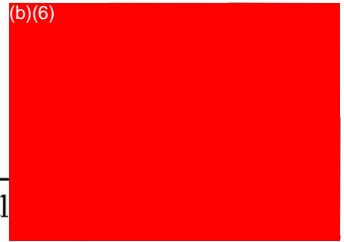
Federal que endosa H.L. Varg



21/11

Signature of Accredited Veterinarian and Date

Firma del Médico Veterinario Acreditado y Fecha



22 MAR 11

Signature of Endorsing Federal and Date

Firma del Médico Veterinario que endosa y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

AFFIDAVIT
DECLARACIÓN JURADA

Page 5 of 5

I (print) ^{(b)(6)} _____ declare that the horses included in this shipment and accompanied by the health certificate number T11-18252 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número T11-18252 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

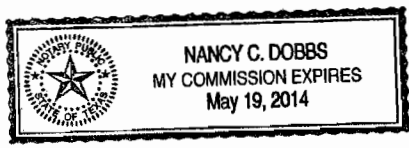
Date and signature of the exporter
Fecha y firma del exportador

^{(b)(6)} _____

March 11, 2011

Date and signature of the Notary Public
Fecha y firma del Notario Público

Nancy C. Dobbs, March 11, 2011



**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

T11-18252

TIME HORSES LOADED ON CONVEYANCE 8:30 P.M.	DATE 3-21-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Brookston, Texas 75421
(b)(6)		NAME OF AUCTION/MARKET N/A
McDaniel & Son		CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.
STREET ADDRESS 1572 CR 35020		STREET ADDRESS Carretera Jerez Sanchez Roman KM 27.5
CITY, STATE, ZIP CODE Brookston, Texas 75421		CITY, STATE, ZIP CODE Jerez, Zacatecas, Mexico, C.P. 99380
AREA CODE & TELEPHONE NO. 903-784-6862		AREA CODE & TELEPHONE NO. 011 52 81 81 58 1700

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. Age	REMARKS Include existing conditions Chip #		
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld				
1	USGV	4501			X							X				X			60	981100002589737
2	USGV	4502							PI			X				X			72	981100002573656
3	USGV	4503							Sr			X				X			108	981100002585076
4	USGV	4504							Pt			X					X		36	981100002575970
5	USGV	4505							Sr			X				X			24	981100002574480
6	USGV	4506							Sr			X				X			72	981100002574023
7	USGV	4507							Pt			X				X			60	981100002576114
8	USGV	4508							Dn			X				X			96	981100002579613
9	USGV	4509							Pt			X				X			84	981100002576403
10	USGV	4510		X								X				X			96	981100002574825
11	USGV	4511							Dn			X				X			108	981100002571116
12	USGV	4512	X									X					X		108	981100002576042
13	USGV	4513							PI			X				X			72	981100002587561
14	USGV	4514							Sr			X				X			60	981100002581886
15	USGV	4515							Rn			X				X			72	981100002570526

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

SIGNATURE (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 _____

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

T11-18252

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

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc. Age	REMARKS Include precondition Chip #	
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld			
16	USGV	4516						Sr		X				X				84	981100002571812
17	USGV	4517						Sr		X				X				60	981100002583803
18	USGV	4518						Pt		X						X		72	981100002572310
19	USGV	4519	X							X				X				60	981100002577767
20	USGV	4520	X							X						X		84	981100002573120
21	USGV	4521		X						X						X		96	981100002571335
22	USGV	4522						Sr		X				X				72	981100002578618
23	USGV	4523						Pt		X				X				60	981100002572774
24	USGV	4524	X							X				X				60	981100002585447
25	USGV	4525						Pt		X				X				108	981100002588462
26	USGV	4526						Pt		X						X		96	981100002574944
27	USGV	4527						Sr		X						X		72	981100002574991
28	USGV	4528						Pt		X				X				84	981100002588872
29	USGV	4529						Pt		X				X				108	981100002399590
30	USGV	4530						Pt		X				X				96	981100002585295
31	USGV	4531						Sr		X				X				72	981100002580995
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).

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
210-719-0000

Control Number: 8101B0326
Office Id: 978101

Mc Daniel & Son
1572 Cr 35020
Brookston TX 75421

Service Date(s)
Begin: 22-MAR-11
End: 23-MAR-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759781177 0250	52.00	2.00	104.00

Total Due \$ 104.00

Remarks: 17-140's T11-18252, T11-18253

Payment Information

Nfc Id 9999999999V

Date	Amount	Payment Type	Account/Check #
25-MAR-11	\$ 52.00	Money Order	3192194772
25-MAR-11	\$ 52.00	Money Order	3192194763

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.

Valid Money Order includes: 1. Heat sensitive, red stop sign AND 2. MoneyGram image visible on the other side when held at an angle. INTERNATIONAL MONEY ORDER

MoneyGram Money Orders



T 11-16570

To Validate: Touch the stop sign, then watch it fade and reappear



MONEY ORDER NUMBER
R203172115498

CALL 1-800-542-3590 TO VERIFY

PAY TO THE ORDER OF / PAGAR A LA ORDEN DE

(b)(6)

PURE PURCHASE

ADDRESS / DIRECCION

(b)(6)

Fairfax, VA

MONEYGRAM PAYMENT SYSTEMS, INC.

INTERNATIONAL MONEY ORDER

DATE: 11.17.2011

R203172115498
MONEY ORDER - 001

PAY EXACTLY

***528090
FIFTY-TWO *****
DOLLARS 00 CENTS

56528014809148
4804700075048540

⑆091900533⑆2031 72115498⑈90

DEF



Health Certificate No. T11-16570
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Page 1 of 5

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**McDaniel & Son
 1572 CR 35020
 Brookston, TX 75421**

2. Name and Address of Importer:

Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGV 6351 981100002577398	Mare	72 Months	USGV 6359 981100002578972	Gelding	72 Months
USGV 6352 981100002572340	Gelding	108 Months	USGV 6360 981100002589256	Gelding	84 Months
USGV 6353 981100002575827	Mare	96 Months	USGV 6361 981100002580769	Mare	96 Months
USGV 6354 981100002578820	Mare	108 Months	USGV 6362 981100002581457	Mare	108 Months
USGV 6355 981100002575005	Mare	72 Months	USGV 6363 981100002590372	Mare	60 Months
USGV 6356 981100002579804	Gelding	60 Months	USGV 6364 981100002580570	Gelding	72 Months
USGV 6357 981100002571560	Mare	84 Months	USGV 6365 981100002584983	Mare	60 Months
USGV 6358 981100002582630	Mare	96 Months	USGV 6366 981100002570504	Mare	72 Months

Mexico, Slaughter horse HC

3/18/11



Health Certificate No. T11-16570
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Page 2 of 5

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGV 6367 981100002586557	Mare	108 Months	USGV 6374 981100002586894	Mare	60 Months
USGV 6368 981100002580018	Mare	120 Months	USGV 6375 981100002586387	Mare	72 Months
USGV 6369 981100002576115	Mare	72 Months	USGV 6376 981100002408206	Mare	144 Months
USGV 6370 981100002578527	Gelding	96 Months	USGV 6377 981100002577031	Mare	72 Months
USGV 6371 981100002574005	Mare	60 Months	USGV 6378 981100002580950	Gelding	84 Months
USGV 6372 981100002573420	Gelding	72 Months	USGV 6379 981100002577286	Mare	108 Months
USGV 6373 981100002575099	Mare	84 Months	USGV 6380 981100002573246	Mare	120 Months

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección 3/17/11

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-16570
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Page 4 of 5

(Delete as appropriate / *Remueva lo que no aplique*)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.]

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*]

Name of Accredited Veterinarian

Nombre del Médico Veterinario

Acreditado

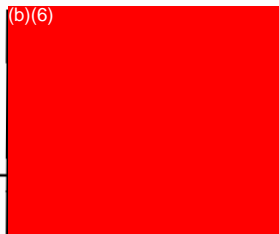
Denise Fowler

Name of Endorsing Federal Veterinarian

Nombre del Médico Veterinario

Federal que endosa

[Handwritten Signature]



Signature of Accredited Veterinarian and Date

Firma del Médico Veterinario Acreditado y Fecha

1/17/11

Signature of Endorsing Federal and Date

Firma del Médico Veterinario que endosa y Fecha

18 APR 11

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

Mexico, Slaughter horse HC

AFFIDAVIT
DECLARACIÓN JURADA

Page 5 of 5

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number T11-16570 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número T11-16570 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

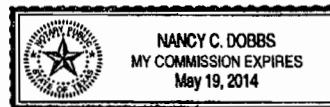
Date and signature of the exporter
Fecha y firma del exportador

(b)(6)

March 11, 2011

Date and signature of the Notary Public
Fecha y firma del Notario Público

Nancy C. Dobbs March 11, 2011



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
T11-16570

TIME HORSES LOADED ON CONVEYANCE <i>8:30 P.M.</i>	DATE <i>3-17-11</i>	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Brookston, Texas 75421
(b)(6)		NAME OF AUCTION/MARKET N/A
McDaniel & Son		CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.
STREET ADDRESS 1572 CR 35020		STREET ADDRESS Carretera Jerez Sanchez Roman KM 27.5
CITY, STATE, ZIP CODE Brookston, Texas 75421		CITY, STATE, ZIP CODE Jerez, Zacatecas, Mexico, C.P. 99380
AREA CODE & TELEPHONE NO. 903-784-6862		AREA CODE & TELEPHONE NO. 011 52 81 81 58 1700

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. Age	REMARKS Include existing conditions Chip #	
		Bay	Grey	Blk	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld			
1	USGV 6351			X										X			72	981100002577398
2	USGV 6352	X														X	108	981100002572340
3	USGV 6353						Sr							X			96	981100002575827
4	USGV 6354		X											X			108	981100002578820
5	USGV 6355						Sr							X			72	981100002575005
6	USGV 6356						Sr									X	60	981100002579804
7	USGV 6357			X										X			84	981100002571560
8	USGV 6358						Sr							X			96	981100002582630
9	USGV 6359						Pt									X	72	981100002578972
10	USGV 6360						Sr									X	84	981100002589256
11	USGV 6361						Sr							X			96	981100002580769
12	USGV 6362						Rn							X			108	981100002581457
13	USGV 6363	X												X			60	981100002590372
14	USGV 6364						Bn									X	72	981100002580570
15	USGV 6365	X												X			60	981100002584983

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

SIGNATURE (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 _____

**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

T11-16570

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION					BREED/TYPE					SEX		BRANDS Tattoos, etc. Age	REMARKS Include precondition Chip #		
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare			Stal	Geld
16	USGV	6366	x											X			72	981100002570504
17	USGV	6367												X			108	981100002586557
18	USGV	6368												X			120	981100002580018
19	USGV	6369												X			72	981100002576115
20	USGV	6370														X	96	981100002578527
21	USGV	6371												X			60	981100002574005
22	USGV	6372														X	72	981100002573420
23	USGV	6373												X			84	981100002575099
24	USGV	6374												X			60	981100002586894
25	USGV	6375	x											X			72	981100002586387
26	USGV	6376												X			144	981100002408206
27	USGV	6377												X			72	981100002577031
28	USGV	6378														X	84	981100002580950
29	USGV	6379												X			108	981100002577286
30	USGV	6380												X			120	981100002573246
31	USGV	6381														X	120	981100002584757
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SIGNATURE (b)(6) is form is true and correct to the best of my knowledge.)



Health Certificate No. T11-18247
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**B & B Trading Co
 996 Vista Hermosa
 Eagle Pass, Texas 78852**

2. Name and Address of Importer:

Nombre y Dirección del Importador:

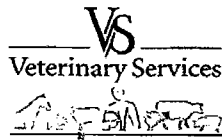
**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0436 985170001026439	FEMALE	130 MONTHS	USGN 0444 985170001013881	FEMALE	72 MONTHS
0437 985170000985255	NEUTER	120 MONTHS	0445 985170001037525	NEUTER	68 MONTHS
0438 985170001010854	FEMALE	120 MONTHS	0446 985170001022793	FEMALE	120 MONTHS
0439 985170001028970	NEUTER	108 MONTHS	0447 985170001026168	NEUTER	96 MONTHS
0440 985170001028004	NEUTER	130 MONTHS	0448 985170000983942	FEMALE	101 MONTHS
0441 985170001014432	FEMALE	120 MONTHS	0449 985170000982440	NEUTER	98 MONTHS
0442 985170000982646	FEMALE	108 MONTHS	0450 985170001014769	FEMALE	120 MONTHS
0443 985170001026666	NEUTER	70 MONTHS	0451 985170000985388	FEAMLE	132 MONTHS

Mexico, Slaughter horse HC

3/17/11



Health Certificate No. **T11-18247**
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0452 985170001026785	FEMALE	72 MONTHS	USGN 0459 985170001027452	NEUTER	130 MONTHS
0453 985170000983974	FEMALE	108 MONTHS	0460 985170001012578	FEMALE	130 MONTHS
0454 985170001013430	FEMALE	110 MONTHS	0461 985170001013106	NEUTER	101 MONTHS
0455 985170001027492	NEUTER	120 MONTHS	0462 985170001027514	FEMALE	108 MONTHS
0456 985170001038020	NEUTER	108 MONTHS	0463 985170001013185	FEMALE	110 MONTHS
0457 985170001000630	NEUTER	121 MONTHS	0464 985170001014576	FEMALE	110 MONTHS
0458 985170001026211	FEMALE	121 MONTHS	0465 985170001029531	FEMALE	120 MONTHS

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección 3/16/11

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-18247
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.]

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*].

RATHKE, HERMAN L. DVM

Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

(b)(6)

Signature of Accredited Veterinarian and Date
Veterinarian
*Firma del Médico Veterinario Acreditado
y Fecha 3/17/11*

VOGT, H.L. DVM

Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)

Signature of Endorsing Federal Veterinarian
*Firma del Médico Veterinario que endosa
y Fecha 3/17/11*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

Mexico, Slaughter horse HC

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 9:00 P.M. DATE 3-15-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Richardson TX

(b)(6)

NAME OF AUCTION/MARKET N/A

CONSIGNOR (OWNER/SHIPPER) NAME R+B TRADING CO

CONSIGNEE (RECEIVEE/DESTINATION) NAME CARNICOS DE JEREZ S.A. DE C.V

STREET ADDRESS 996 VISTA HERMOSA

STREET ADDRESS CARRETERA JEREZ SANCHER ROMAN Km 27.5

CITY, STATE, ZIP CODE EAGLE PASS TX 78852

CITY, STATE, ZIP CODE JEREZ ZACATECAS MEXICO C.P. 99380

AREA CODE & TELEPHONE NO. 830 757 6404

AREA CODE & TELEPHONE NO. 49 - 45 - 40 - 46

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				
US6N	0436		✓												✓			130m	985 170 001 026 439
	37	✓															✓	120m	985 170 000 985 255
	38					✓									✓			120m	985 170 001 010 854
	39					✓											✓	108m	985 170 001 028 970
	40				✓												✓	130m	985 170 001 028 004
	41		✓											✓				120m	985 170 001 014 432
	42					✓								✓				108m	985 170 000 982 646
	43					✓											✓	70m	985 170 001 026 666
	44					✓								✓				72m	985 170 001 013 881
	45				✓												✓	68m	985 170 001 037 525
	46							✓						✓				120m	985 170 001 022 793
	47				✓												✓	96m	985 170 001 026 168
	48					✓								✓				101m	985 170 000 983 942
	49							✓									✓	98m	985 170 000 982 440
US6N	50				✓									✓				120m	985 170 001 014 769

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

SIGNATURE (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 (b)(6) Information contained in this form is true and correct to

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

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

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

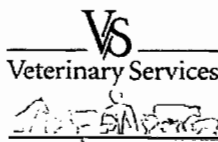
(Please type or print in ink)

	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	USGN	0451					✓						✓					132m	985 170 000 985 388
17		52					✓						✓					72m	985 170 001 026 785
18		53			✓								✓					108m	985 170 000 983 974
19		54					✓						✓					110m	985 170 001 013 430
20		55					✓						✓				✓	120m	985 170 001 027 492
21		56						✓					✓				✓	108m	985 170 001 038 020
22		57	✓										✓				✓	121m	985 170 001 000 630
23		58				✓							✓					121m	985 170 001 026 211
24		59					✓						✓				✓	130m	985 170 001 027 452
25		60					✓						✓					130m	985 170 001 012 578
26		61			✓								✓				✓	101m	985 170 001 013 106
27		62					✓						✓					108m	985 170 001 027 514
28		63	✓										✓					110m	985 170 001 013 185
29		64					✓						✓					110m	985 170 001 014 576
30		65		✓									✓					120m	985 170 001 029 531
31		66					✓						✓					130m	985 170 000 984 141
32		67					✓						✓					132m	985 170 001 014 819
33		68					✓						✓					108m	985 170 001 012 585
34	USGN	69						✓					✓					98m	985 170 000 984 576
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 USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR UP TO 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE: [Redacted] certify that the information contained in this form is true and correct to the best of my knowledge.)



Health Certificate No. T11-18248
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**B & B Trading Co
 996 Vista Hermosa
 Eagle Pass, Texas 78852**

2. Name and Address of Importer:

Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/ <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>
USGN 0471 985170001036450	FEMALE	120 MONTHS	USGN 0479 985170001016401	FEMALE	126 MONTHS
0472 985170000984110	FEMALE	120 MONTHS	0480 985170001027854	FEMALE	130 MONTHS
0473 985170001006599	FEMALE	130 MONTHS	0481 985170001038240	FEMALE	108 MONTHS
0474 985170001013187	NEUTER	98 MONTHS	0482 985170001013108	FEMALE	98 MONTHS
0475 985170001026783	NUETER	101 MONTHS	0483 985170001013776	FEMALE	98 MONTHS
0476 985170001026599	NEUTER	108 MONTHS	0484 985170001028635	FEMALE	101 MONTHS
0477 985170001015184	FEMALE	130 MONTHS	0485 985170001009578	NEUTER	110 MONTHS
0478 985170001029107	NEUTER	126 MONTHS	0486 985170001027435	FEMALE	110 MONTHS

Mexico, Slaughter horse HC



Health Certificate No. T11-18248
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0487 985170001026257	FEMALE	110 MONTHS	USGN 0494 985170001013606	FEMALE	136 MONTHS
0488 985170001010876	NEUTER	99 MONTHS	0495 985170001007652	FEMALE	120 MONTHS
0489 985170001027804	FEMALE	108 MONTHS	0496 985170000983619	NEUTER	125 MONTHS
0490 985170001026923	FEMALE	120 MONTHS	0497 985170001012972	NEUTER	108 MONTHS
0491 985170001007417	NEUTER	120 MONTHS	0498 985170001014087	FEMALE	108 MONTHS
0492 985170001011542	FEMALE	130 MONTHS	0499 985170001011524	FEMALE	120 MONTHS
0493 985170001003368	NEUTER	136 MONTHS	0500 985170001029545	NEUTER	130 MONTHS

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

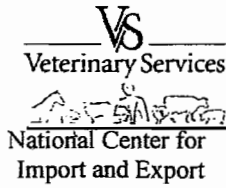
Inspection date / Fecha de inspección 3/17/11

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-18248
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.]

[Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.].

RATHKE, HERMAN, L. DVM

Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

VOGT, H.L. DVM

Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)

Signature of Accredited Veterinarian and Date
Veterinarian
*Firma del Médico Veterinario Acreditado
y Fecha 3/17/11*

(b)(6)

Signature of Endorsing Federal Veterinarian
*Firma del Médico Veterinario que endosa
y Fecha 3/18/11*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

Mexico, Slaughter horse HC

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

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

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

TIME HORSES LOADED ON CONVEYANCE 10:00 PM DATE 3-15-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE KARLISVAAR TX

VEHICLE (b)(6)

NAME OF AUCTION/MARKET NA

CONSIGNOR (OWNER/SHIPPER) NAME B+B TRADING CO

CONSIGNEE (RECEIVER/DESTINATION) NAME CARNICOS DE JEREZ S.A. DE C.V

STREET ADDRESS 996 VISTA HERMOSA

STREET ADDRESS CARRETETA JEREZ SANCHEZ ROMAN Km 27.5

CITY, STATE, ZIP CODE EAGLEPASS TX 78852

CITY, STATE, ZIP CODE JEREZ ZACATECAS MEXICO C.P. 99380

AREA CODE & TELEPHONE NO. 830 757 6404

AREA CODE & TELEPHONE NO. 49 45-40-46

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			
US6N	0471					✓			✓					✓			120m	985 170 001 036 450
	72				✓				✓					✓			120m	985 170 000 984 110
	73				✓				✓					✓			130m	985 170 001 006 599
	74				✓				✓						✓		98m	985 170 001 013 187
	75					✓			✓						✓		101m	985 170 001 026 783
	76	✓							✓						✓		108m	985 170 001 026 599
	77				✓				✓					✓			130m	985 170 001 015 184
	78					✓			✓						✓		126m	985 170 001 029 107
	79					✓			✓					-			126m	985 170 001 016 401
	80	✓							✓					-			130m	985 170 001 027 854
	81					✓			✓					✓			108m	985 170 001 038 240
	82					✓			✓					✓			98m	985 170 001 013 108
	83					✓			✓					✓			98m	985 170 001 013 776
	84				✓				✓					✓			101m	985 170 001 028 635
US6N	85				✓				✓						✓		110m	985 170 001 009 578

HOURS (b)(6) AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS ON CONVEYANCE.

CANADIAN FOOD INSPECTOR EST. DATE TIME

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).

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

SIGNATURE (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

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

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

	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	US6N	86				✓				✓					✓			110m	985 170 001 027 435
17		87	✓							✓					✓			110m	985 170 001 026 257
18		88					✓			✓						✓	99m	985 170 001 010 876	
19		89					✓			✓					✓		108m	985 170 001 027 804	
20		90				✓				✓					✓		120m	985 170 001 026 923	
21		91					✓			✓						✓	120m	985 170 001 007 417	
22		92						✓		✓					✓		130m	985 170 001 011 542	
23		93					✓			✓						✓	136m	985 170 001 003 368	
24		94						✓		✓					✓		136m	985 170 001 013 606	
25		95				✓				✓					✓		120m	985 170 001 007 652	
26		96					✓			✓						✓	125m	985 170 000 983 619	
27		97					✓			✓						✓	108m	985 170 001 012 972	
28		98						✓		✓					✓		108m	985 170 001 014 087	
29		99						✓		✓					✓		120m	985 170 001 011 524	
30		0500					✓			✓						✓	130m	985 170 001 029 545	
31		0501						✓		✓					✓		130m	985 170 001 026 840	
32	US6N	0502						✓		✓					✓		118m	985 170 000 982 780	
33																	//		
34																			
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37																			
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41																			
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(b)(6)

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



Health Certificate No. T11-18249
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:
B & B Trading Co
996 Vista Hermosa
Eagle Pass, Texas 78852

2. Name and Address of Importer:

Nombre y Dirección del Importador:
Carnicos de Jerez, S.A. de C.V.
Carratera Jerez Sanchez Roman KM 27.5
Jerez, Zacatecas, Mexico C.P. 99380

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/ <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>
USGN 0541 985170000983170	FEMALE	130 MONTHS	USGN 0549 985170001027776	FEMALE	101 MONTHS
0542 985170001027631	FEMALE	130 MONTHS	0550 985170001013375	FEMALE	98 MONTHS
0543 985170001027913	FEMALE	120 MONTHS	0551 985170000995393	FEMALE	80 MONTHS
0544 985170001007594	FEMALE	98 MONTHS	0552 985170000998961	NEUTER	110 MONTHS
0545 985170001012117	FEMALE	105 MONTHS	0553 985170001018161	NUETER	110 MONTHS
0546 985170001024860	FEMALE	105 MONTHS	0554 985170000995864	FEMALE	130 MONTHS
0547 985170001028141	FEMALE	120 MONTHS	0555 985170001046630	NEUTER	120 MONTHS
0548 985170001010983	NEUTER	126 MONTHS	0556 985170001026769	FEMALE	98 MONTHS

Mexico, Slaughter horse HC



Health Certificate No. T11-18249
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0557 985170001036316	NEUTER	105 MONTHS	USGN 0564 985170000991958	FEMALE	101 MONTHS
0558 985170001012336	FEMALE	101 MONTHS	0565 985170000990287	FEMALE	120 MONTHS
0559 985170001012869	FEMALE	120 MONTHS	0566 985170001011525	NEUTER	120 MONTHS
0560 985170001044901	FEMALE	120 MONTHS	0567 985170000994067	FEMALE	130 MONTHS
0561 985170000995892	FEMALE	130 MONTHS	0568 985170000989445	FEMALE	130 MONTHS
0562 985170000991685	FEMALE	130 MONTHS	0569 985170001040013	FEMALE	108 MONTHS
0563 985170000989249	NEUTER	108 MONTHS	0570 985170001016134	NEUTER	120 MONTHS

TOTAL:30 HORSES

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

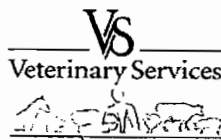
Inspection date / Fecha de inspección 3/17/11

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-18249
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0557 985170001036316	NEUTER	105 MONTHS	USGN 0564 985170000991958	FEMALE	101 MONTHS
0558 985170001012336	FEMALE	101 MONTHS	0565 985170000990287	FEMALE	120 MONTHS
0559 985170001012869	FEMALE	120 MONTHS	0566 985170001011525	NEUTER	120 MONTHS
0560 985170001044901	FEMALE	120 MONTHS	0567 985170000994067	FEMALE	130 MONTHS
0561 985170000995892	FEMALE	130 MONTHS	0568 985170000989445	FEMALE	130 MONTHS
0562 985170000991685	FEMALE	130 MONTHS	0569 985170001040013	FEMALE	108 MONTHS
0563 985170000989249	NEUTER	108 MONTHS	0570 985170001016134	NEUTER	120 MONTHS

TOTAL:30 HORSES

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección 3/17/11

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-18249
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.]

[Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.]

RATHKE, HERMAN, L. DVM

Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

VOGT, H. L. DVM

Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)

Signature of Accredited Veterinarian and Date
Veterinarian
*Firma del Médico Veterinario Acreditado
y Fecha 3/17/11*

(b)(6)

Signature of Endorsing Federal Veterinarian
*Firma del Médico Veterinario que endosa
y Fecha 3/18/11*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

Mexico, Slaughter horse HC

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

10:00 PM

DATE

3-16-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Kalamazoo MI

(b)(6)

NAME OF AUCTION/MARKET

N/A

CONSIGNOR (OWNER/SHIPPER) NAME

B+B TRADING CO

STREET ADDRESS

996 VISTA HERMOSA

CITY, STATE, ZIP CODE

EAGLE PASS TX 78852

AREA CODE & TELEPHONE NO.

830 757 6404

CONSIGNEE (RECEIVER/DESTINATION) NAME

CARNICOS DE JEREZ S.A. DE C.V

STREET ADDRESS

CARRETERA JEREZ SANCHEZ ROMAN Km 27.5

CITY, STATE, ZIP CODE

JEREZ ZALATECAS MEXICO C.P. 99380

AREA CODE & TELEPHONE NO.

49 45-40-46

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			
US6N	0541					✓			✓					✓			130m	985 170 000 983 170
	42					✓			✓					✓			130m	985 170 001 027 631
	43					✓			✓					✓			120m	985 170 001 027 913
	44						✓		✓					✓			98m	985 170 001 007 594
	45					✓			✓					✓			105m	985 170 001 012 117
	46					✓			✓					✓			105m	985 170 001 024 860
	47					✓			✓					✓			120m	985 170 001 028 141
	48					✓			✓						✓		126m	985 170 001 010 983
	49					✓			✓					✓			101m	985 170 001 027 776
	50					✓			✓					✓			98m	985 170 001 013 375
	0551					✓			✓					✓			80m	985 170 000 995 393
	52				✓				✓						✓		110m	985 170 000 998 961
	53				✓				✓						✓		110m	985 170 001 018 161
	54					✓			✓					✓			130m	985 170 000 995 864
US6N	55					✓			✓						✓		120m	985 170 001 046 630

HORSES MUST BE KEPT IN THE VEHICLE FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY AFTER LOADING.

SIGNATURE

I HEREBY CERTIFY THAT THE INFORMATION ON 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 THE PERSON WHOSE INFORMATION CONTAINED IN THIS FORM IS TRUE AND CORRECT TO THE BEST OF HIS OR HER KNOWLEDGE.

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)

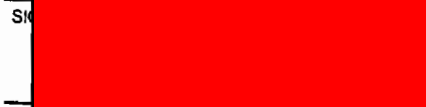
According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated 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	US6N	56					✓			✓					✓			98m	985 170 001 026 769
17		57					✓			✓							✓	105m	985170001036316
18		58					✓			✓					✓			101m	985170001012336
19		59					✓			✓					✓			120m	985170001012869
20		60					✓			✓					✓			120m	985170001044901
21		61		✓						✓					✓			130m	985 170 000 995 892
22		62					✓			✓					✓			130m	985 170 000 991 685
23		63					✓			✓							✓	108m	985 170 000 989 249
24		64					✓			✓					✓			101m	985 170 000 991 958
25		65					✓			✓					✓			120m	985 170 000 990 287
26		66					✓			✓							✓	120m	985 170 001 011 525
27		67					✓			✓					✓			130m	985 170 000 994 067
28		68					✓			✓					✓			130m	985 170 000 989 445
29		69					✓			✓					✓			108m	985 170 001 040 013
30	US6N	70					✓			✓							✓	120m	985 170 001 016 134
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 OR BOTH (18 U.S.C. SECTION 1001).

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



Health Certificate No. **T11-18250**
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**B & B Trading Co
 996 Vista Hermosa
 Eagle Pass, Texas 78852**

2. Name and Address of Importer:

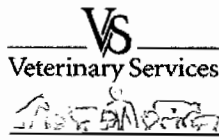
Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/ <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>
USGN 0506 985170000983459	FEMALE	18 MONTHS	USGN 0514 985170000996116	NEUTER	24 MONTHS
0507 985170001036089	NEUTER	72 MONTHS	0515 985170001014312	FEMALE	36 MONTHS
0508 985170001010077	NEUTER	72 MONTHS	0516 985170000993706	FEMALE	120 MONTHS
0509 985170001022948	FEMALE	108 MONTHS	0517 985170001010373	NEUTER	120 MONTHS
0510 985170001013163	NEUTER	108 MONTHS	0518 985170000992680	NEUTER	108 MONTHS
0511 985170001011725	NEUTER	24 MONTHS	0519 985170000988790	NEUTER	108 MONTHS
0512 985170001009558	NEUTER	24 MONTHS	0520 985170001009009	NEUTER	96 MONTHS
0513 985170001014124	NEUTER	18 MONTHS	0521 985170000993717	FEMALE	96 MONTHS

Mexico, Slaughter horse HC



Health Certificate No. T11-18250
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0522 985170001013967	NEUTER	96 MONTHS	USGN 0529 985170000993391	NEUTER	120 MONTHS
0523 985170001014504	FEMALE	24 MONTHS	0530 985170000992771	NEUTER	36 MONTHS
0524 985170000993513	NEUTER	18 MONTHS	0531 985170000986274	NEUTER	36 MONTHS
0525 985170001014742	NEUTER	18 MONTHS	0532 985170000991568	FEMALE	132 MONTHS
0526 985170000993952	NEUTER	24 MONTHS	0533 985170000995436	NEUTER	120 MONTHS
0527 985170001013553	NEUTER	24 MONTHS	0534 985170001017611	NEUTER	120 MONTHS
0528 985170000993096	FEMALE	108 MONTHS	0535 985170001024110	FEMALE	132 MONTHS

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección 3/18/11

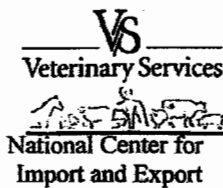
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

Identification number/ <i>Número de identificación</i>	Sex/ <i>Sexo</i>	Breed/ <i>Raza</i>	Age / <i>Edad</i>	Color/ <i>Color</i>
USGN 0536 985170001028086	NEUTER		108 MONTHS	
0537 985170001028060	FEMALE		24 MONTHS	
TOTAL:32 HORSES				



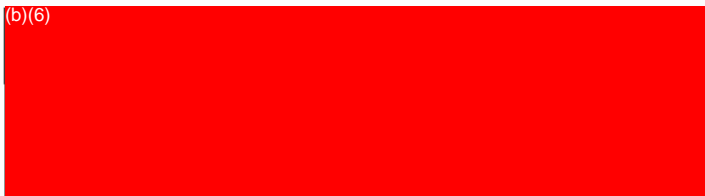
Health Certificate No. T11-18250
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* pp ticks.]

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*].

RATHKE, HERMAN, L. DVM

Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*



Veterinarian
*Firma del Médico Veterinario Acreditado
y Fecha 3/21/11*

VOGT, H. L. DVM

Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*



Signature of Endorsing Federal Veterinarian
*Firma del Médico Veterinario que endosa
y Fecha 3/21/11*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

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

10:00 AM

DATE

3-17-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

KANAWHA JK

NAME OF AUCTION/MARKET

N/A

CONSIGNOR (OWNER/SHIPPER) NAME

D & D TRADING CO

CONSIGNEE (RECEIVER/DESTINATION) NAME

CARLOS DE JEREZ SA. DE CD.

STREET ADDRESS

996 Vista Hermosa

STREET ADDRESS

CALLE JEREZ SANCHO ROMAN KUSIN

CITY, STATE, ZIP CODE

CAJAL TASSO TX 78852

CITY, STATE, ZIP CODE

JEREZ Zacatecas Mexico CP. 99320

AREA CODE & TELEPHONE NO.

830 457-6404

AREA CODE & TELEPHONE NO.

49 45-40-46

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				
US6N	0506				✓				✓						✓			18A	985 170 000 983 459
	07					✓			✓									18M	985 170 001 036 089
	08						✓		✓									18M	985 170 001 010 077
	09					✓			✓					✓				10PA	985 170 001 022 948
	10						✓		✓									10PA	985 170 001 013 163
	11					✓			✓									12M	985 170 001 011 725
	12						✓		✓									12M	985 170 001 009 558
	13			✓					✓									18M	985 170 001 014 124
	14					✓			✓									12M	985 170 000 996 116
	15					✓			✓					✓				36M	985 170 001 014 312
	16				✓				✓					✓				12M	985 170 000 993 706
	17	✓							✓									12M	985 170 001 010 373
	18				✓				✓									10PA	985 170 000 992 680
	19					✓			✓									10PA	985 170 000 988 790
US6N	20					✓			✓									9M	985170001009009

HORSES MUST BE HELD FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY PRIOR TO Slaughter.

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: (b)(6) Information contained in this form is true and correct to the best of my knowledge.

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.

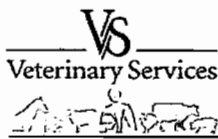
FORM
APPROVED
OMB NO.
0579-0160

	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	US6N	21						✓		✓					✓			96M	985 170 000 993 717
17		22					✓			✓							✓	96M	985 170 001 013 967
18		23						✓		✓					✓			24M	985 170 001 014 504
19		24						✓		✓							✓	18M	985 170 000 993 513
20		25				✓				✓							✓	17M	985 170 001 014 742
21		26							✓	✓							✓	24M	985 170 000 993 952
22		27				✓				✓							✓	24M	985 170 001 013 553
23		28	✓							✓					✓			18M	985 170 000 993 096
24		29				✓				✓							✓	17M	985 170 000 993 391
25		30							✓	✓							✓	26M	985 170 000 992 771
26		31							✓	✓							✓	36M	985 170 000 986 274
27		32					✓			✓					✓			13M	985 170 000 991 568
28		33						✓		✓							✓	12M	985 170 000 995 436
29		34						✓		✓							✓	12M	985 170 001 017 611
30		35						✓		✓					✓			13M	985 170 001 024 110
31		36		✓						✓							✓	10M	985 170 001 028 086
32	US6N	37						✓		✓					✓			24M	985 170 001 028 060
33																			
34																			
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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).

(b)(6)

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



Health Certificate No. T11-18251
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**B & B Trading Co
 996 Vista Hermosa
 Eagle Pass, Texas 78852**

2. Name and Address of Importer:

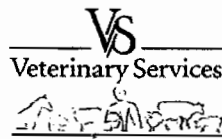
Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0571 985170001027499	FEMALE	130 MONTHS	USGN 0579 985170001028823	FEMALE	110 MONTHS
0572 985170001015265	FEMALE	130MONTHS	0580 985170001029264	NEUTER	116 MONTHS
0573 985170001014977	NEUTER	101MONTHS	0581 985170000992254	FEMALE	116 MONTHS
0574 985170000983728	FEMALE	122 MONTHS	0582 985170000989541	NEUTER	101 MONTHS
0575 985170001013795	FEMALE	101 MONTHS	0583 985170000990104	FEMALE	97 MONTHS
0576 985170001028690	FEMALE	98 MONTHS	0584 985170000991304	FEMALE	98 MONTHS
0577 985170001003392	NEUTER	125 MONTHS	0585 985170000997117	NEUTER	117 MONTHS
0578 985170001014293	FEMALE	110 MONTHS	0586 985170001018480	FEMALE	120 MONTHS

Mexico, Slaughter horse HC



Health Certificate No. T11-18251
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0587 985170000987187	FEMALE	130 MONTHS	USGN 0594 985170000996811	NEUTER	122 MONTHS
0588 985170001017098	FEMALE	121 MONTHS	0595 985170001038162	FEMALE	117 MONTHS
0589 985170000991882	FEMALE	129 MONTHS	0596 985170001010810	FEMALE	119 MONTHS
0590 985170001018133	NEUTER	115 MONTHS	0597 985170001027861	FEMALE	98 MONTHS
0591 985170001027220	FEMALE	97 MONTHS	0598 985170000987787	FEMALE	120 MONTHS
0592 985170001024823	NEUTER	116 MONTHS	0599 985170000997223	FEMALE	101 MONTHS
0593 985170001011512	FEMALE	117 MONTHS	TOTAL:29 HORSES		

CERTIFICATION STATEMENTS / CERTIFICACIONES

- Horses originate from the United States.
Los animales son originarios de Estados Unidos.
- Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
 Inspection date / Fecha de inspección 3/18/11
- Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.
- During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-18251
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.]

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*].

RATHKE, HERMAN, L. DVM

Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

(b)(6)

Signature of Accredited Veterinarian and Date
Veterinarian
*Firma del Médico Veterinario Acreditado
y Fecha 3/21/11*

VOGT, H.L. DVM

Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)

Signature of Endorsing Federal Veterinarian
*Firma del Médico Veterinario que endosa
y Fecha 3/21/11*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

Mexico, Slaughter horse HC

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 9:00 P.M. DATE 3/19/11 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 B+B TRADING CO CONSIGNEE (RECEIVER DESTINATION) NAME CARNICOS DE JEREZ S.A. DE C.V.

STREET ADDRESS 996 VISTA HERMOSA STREET ADDRESS CARRETERA JEREZ SANCHEZ ROMAN Km 27.5

CITY, STATE, ZIP CODE EAGLE PASS TX 78852 CITY, STATE, ZIP CODE JEREZ ZACATECAS MEXICO C.P. 99380

AREA CODE & TELEPHONE NO. 830 757 6404 AREA CODE & TELEPHONE NO. 49 45-40-46

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		
US6N	CS71					✓			✓				✓			130m	985 170 001 027 499
	72					✓			✓				✓			130m	985 170 001 015 265
	73	✓							✓						✓	101m	985 170 001 014 977
	74					✓			✓				✓			122m	985 170 000 983 728
	75					✓			✓				✓			101m	985 170 001 013 795
	76					✓			✓				✓			98m	985 170 001 028 690
	77	✓							✓						✓	125m	985 170 001 003 392
	78					✓			✓				✓			110m	985 170 001 014 293
	79					✓			✓				✓			110m	985 170 001 028 823
	80					✓			✓						✓	116m	985 170 001 029 264
	81					✓			✓				✓			116m	985 170 000 992 254
	82	✓							✓						✓	101m	985 170 000 989 541
	83	✓							✓				✓			97m	985 170 000 990 104
	84		✓						✓				✓			98m	985 170 000 991 304
US6N	85					✓			✓						✓	117m	985 170 000 997 117

HORSES (b)(6) MINIMUM OF 6 CONSECUTIVE HOURS

SIGNATURE (b)(6)
I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS FORM AND THE INFORMATION IN IT WAS 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 (b)(6) Information contained in this form is true and correct to the best of my knowledge.

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			
US6N	86					✓			✓					✓			120m	985 170 001 018 480
	87					✓			✓					✓			130m	985 170 000 987 187
	88					✓			✓					✓			121m	985 170 001 017 098
	89	✓							✓					✓			129m	985 170 000 991 882
	90						✓		✓						✓		115m	985 170 001 018 133
	91	✓							✓					✓			97m	985 170 001 027 220
	92					✓			✓						✓		116m	985 170 001 024 823
	93	✓							✓					✓			117m	985170001011512
	94					✓			✓						✓		122m	985 170 000 987 811
	95			✓					✓					✓			117m	985 170 001 038 162
	96	✓							✓					✓			119m	985 170 001 010 810
	97	✓							✓					✓			98m	985 170 001 027 861
	98	✓							✓					✓			120m	985 170 000 987 787
US6N	99					✓			✓					✓			101m	985 170 000 997 223
30																		
31																		
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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 OF UP TO 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE: [Redacted] Information contained in this form is true and correct to the best of my knowledge.)



Health Certificate No. T11-18271
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**B & B Trading Co
 996 Vista Hermosa
 Eagle Pass, Texas 78852**

2. Name and Address of Importer:

Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/ <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>
USGN 0636 985170000994435	FEMALE	120 MONTHS	USGN 0644 985170001008705	FEMALE	120 MONTHS
0637 985170001047530	FEMALE	120 MONTHS	0645 985170001010853	FEMALE	125 MONTHS
0638 985170000993060	FEMALE	98 MONTHS	0646 985170000990645	FEMALE	125 MONTHS
0639 985170000996057	FEMALE	80 MONTHS	0647 985170000995351	NEUTER	130 MONTHS
0640 985170001046620	FEMALE	110 MONTHS	0648 985170001018085	FEMALE	130 MONTHS
0641 985170000989100	NEUTER	130 MONTHS	0649 985170000992190	FEMALE	120 MONTHS
0642 985170001015628	FEMALE	125 MONTHS	0650 985170001017651	FEMALE	120 MONTHS
0643 985170001018508	FEMALE	101 MONTHS	0651 985170001016363	FEMALE	110 MONTHS

Mexico, Slaughter horse HC



Health Certificate No. T11-18271
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0652 985170001046817	FEMALE	110 MONTHS	USGN 0659 985170000992831	FEMALE	97 MONTHS
0653 985170000994139	NEUTER	120 MONTHS	0660 985170000993347	FEMALE	110 MONTHS
0654 985170000998625	NEUTER	120 MONTHS	0661 985170000994411	FEMALE	115 MONTHS
0655 985170001037584	FEMALE	130 MONTHS	0662 985170001015018	FEMALE	120 MONTHS
0656 985170001010581	NEUTER	115 MONTHS	0663 985170001027024	FEMALE	120 MONTHS
0657 985170001015143	FEMALE	101 MONTHS	0664 985170001010945	FEMALE	110 MONTHS
0658 985170001013360	FEMALE	97 MONTHS	0665 985170001036145	NEUTER	130 MONTHS

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.
Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
 Inspection date / Fecha de inspección 3/22/11

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

Identification number/Número de identificación	Sex/Sexo	Breed/Raza	Age /Edad	Color/Color
USGN 0666 985170001028039	FEMALE		120 MONTHS	
0667 985170000994594	FEMALE		101 MONTHS	
TOTAL:32 HORSES				



Health Certificate No. T11-18271
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* pp ticks.]

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*].

RATHKE, HERMAN, L. DVM

Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

(b)(6)

Signature of Accredited veterinarian and Date
Veterinarian
*Firma del Médico Veterinario Acreditado
y Fecha 3/22/11*

VOGT, H. L. DVM

Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)

Signature of Endorsing Federal Veterinarian
*Firma del Médico Veterinario que endosa
y Fecha 3/23/11*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

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 9:00 PM	DATE 3/21/11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
CONSIGNOR (OWNER/SHIPPER) NAME B+B TRADING CO		NAME OF AUCTION/MARKET
STREET ADDRESS 996 VISTA HERMOSA		CONSIGNEE (RECEIVER/DESTINATION) NAME CAZNICOS DE JEJEEZ S.A. DE C.V.
CITY, STATE, ZIP CODE EAGLE PASS TX 78852		STREET ADDRESS CARRETERA JEJEEZ SANCHEZ ROMAN Km 27.5
AREA CODE & TELEPHONE NO. 830 757 6404		CITY, STATE, ZIP CODE JEJEEZ ZALATECAS MEXICO C.P. 99380
		AREA CODE & TELEPHONE NO. 401 - 45-40-46

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	USGN 0636								✓	✓					✓			120m	985 170 000 994 435
2	37								✓	✓					✓			120m	985 170 001 047 530
3	38								✓	✓					✓			98m	985 170 000 993 060
4	39			✓					✓	✓					✓			80m	985 170 000 996 057
5	40								✓	✓					✓			110m	985 170 001 046 620
6	41						✓		✓	✓							✓	130m	985 170 000 989 100
7	42				✓				✓	✓					✓			125m	985 170 001 015 628
8	43								✓	✓					✓			101m	985 170 001 018 508
9	44		✓							✓				✓				120m	985170001008705
10	45		✓							✓				✓				125m	985 170 001 010 853
11	46								✓	✓				✓				125m	985 170 000 990 645
12	47								✓	✓			male				✓	130m	985 170 000 995 351
13	48		✓							✓				✓				130m	985 170 001 018 085
14	49		✓							✓				✓				120m	985 170 000 992 190
15	USGN 50		✓							✓				✓				120m	985 170 001 017 651

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY PRIOR TO LOADING. (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 and belief.) (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

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

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

(Please type or print in ink)

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			
USGN	0657		✓							✓					✓		110m	985 170 001 016 363
	52		✓							✓					✓		110m	985 170 001 046 817
	53							✓		✓							120m	985 170 000 994 139
	54							✓		✓							120m	985 170 000 998 625
	55		✓							✓					✓		130m	985 170 001 037 584
	56							✓		✓							115m	985170001010581
	57					✓				✓					✓		101m	985170001015143
	58					✓				✓					✓		97m	985170001013360
	59		✓								✓				✓		97m	985170000992831
	60		✓							✓					✓		110m	985 170 000 993 347
	61							✓		✓					✓		115m	985 170 000 994 411
	62		✓								✓				✓		120m	985170001015018
	63									✓					✓		120m	985 170 001 027 024
	64	✓								✓					✓		110m	985170001010945
	65							✓		✓						✓	130m	985 170 001 036 145
	66							✓		✓					✓		120m	985 170 001 028 039
USGN	67									✓					✓		101m	985 170 000 994 594

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.)



Health Certificate No. T11-18272
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**B & B Trading Co
 996 Vista Hermosa
 Eagle Pass, Texas 78852**

2. Name and Address of Importer:

Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/ <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>
USGN 0601 985170001029119	FEMALE	101 MONTHS	USGN 0609 985170000984862	FEMALE	108 MONTHS
0602 985170000984475	NEUTER	115 MONTHS	0610 985170001010646	FEMALE	24 MONTHS
0603 985170001023812	FEMALE	120 MONTHS	0611 985170001010259	NEUTER	97 MONTHS
0604 985170001009891	FEMALE	108 MONTHS	0612 985170001029217	FEMALE	120 MONTHS
0605 985170001005108	NEUTER	110 MONTHS	0613 985170001014127	FEMALE	121 MONTHS
0606 985170001015115	FEMALE	116 MONTHS	0614 985170001028676	NEUTER	125 MONTHS
0607 985170001039314	FEMALE	116 MONTHS	0615 985170001037601	NEUTER	130 MONTHS
0608 985170000982929	FEMALE	98 MONTHS	0616 985170001012546	NEUTER	120 MONTHS



Health Certificate No. T11-18272
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0617 985170001028561	NEUTER	120 MONTHS	USGN 0624 985170001026575	NEUTER	110 MONTHS
0618 985170001010125	FEMALE	101 MONTHS	0625 985170001010037	NEUTER	30 MONTHS
0619 985170001026972	NEUTER	98 MONTHS	0626 985170001006088	FEMALE	120 MONTHS
0620 985170000983620	FEMALE	48 MONTHS	0627 985170001010976	FEMALE	120 MONTHS
0621 985170001029229	FEMALE	97 MONTHS	0628 985170000982901	FEMALE	110 MONTHS
0622 985170001012794	NEUTER	115 MONTHS	0629 985170000983020	NEUTER	98 MONTHS
0623 985170000983481	FEMALE	110 MONTHS	0630 985170001026086	FEMALE	115 MONTHS

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección 3/22/11

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

Identification number/Número de identificación	Sex/Sexo	Breed/Raza	Age /Edad	Color/Color
USGN 0631 985170000986217	FEMALE		120 MONTHS	
0632 985170001016462	FEMALE		120 MONTHS	
0633 985170001009942	NEUTER		110 MONTHS	
0634 985170001029490	FEMALE		99 MONTHS	
0635 985170001001818	FEMALE		30 MONTHS	
TOTAL:35 HORSES				



Health Certificate No. T11-18272
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.]

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*].

RATHKE, HERMAN, L. DVM

Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

VOGT, H.L. DVM

Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)

(b)(6)

Signature of Accredited Veterinarian and Date
Veterinarian
*Firma del Médico Veterinario Acreditado
y Fecha 3/22/11*

Signature of Endorsing Federal
*Firma del Médico Veterinario que endosa
y Fecha 3/23/11*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

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: 10:00 PM DATE: 3/21/11 CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE: _____

NAME OF AUCTION/MARKET: _____

CONSIGNOR (OWNER/SHIPPER) NAME: BIB TRADING CO CONSIGNEE (RECEIVER/DESTINATION) NAME: CARNICOS DE JEREZ S.A. DE C.V.

STREET ADDRESS: 996 VISTA HERMOSA STREET ADDRESS: CARRETERA JEREZ SANCHEZ ROMAN Km 27.5

CITY, STATE, ZIP CODE: EAGLE PASS TX 78852 CITY, STATE, ZIP CODE: JEREZ ZACATECAS MEXICO C.P. 99380

AREA CODE & TELEPHONE NO.: 830 757 6404 AREA CODE & TELEPHONE NO.: 469 45-40-46

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	USGN 0601					✓			✓					✓			101m	985 170 001 029 119
2	02				✓				✓								115m	985 170 000 984 475
3	03				✓				✓					✓			120m	985 170 001 023 812
4	04				✓				✓					✓			108m	985 170 001 009 891
5	05				✓				✓								110m	985 170 001 005 108
6	06					✓			✓					✓			116m	985 170 001 015 115
7	07	✓							✓					✓			116m	985 170 001 039 314
8	08	✓							✓					✓			98m	985 170 000 982 929
9	09				✓				✓					✓			108m	985 170 000 984 862
10	10						✓		✓					✓			24m	985 170 001 010 646
11	11					✓			✓							✓	97m	985 170 001 010 259
12	12							✓	✓					✓			120m	985 170 001 029 217
13	13			✓					✓					✓			121m	985 170 001 014 127
14	14				✓				✓					✓			125m	985 170 001 028 676
15	USGN 15					✓			✓					✓			130m	985 170 001 037 601

HORSES MUST REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY FOLLOWING LOADING ON CONVEYANCE.

SIGNATURE: _____

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____

DATE _____

TIME _____

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).

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____

DATE _____

TIME _____

SIGNATURE OF OWNER/SHIPPER (certify that the information contained in this form is true and correct to the best of your knowledge): _____

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			
USGN	16					✓			✓							✓	120m	985 170 001 012 546
	17	✓							✓							✓	120m	985 170 001 028 561
	18				✓				✓						✓		101m	985 170 001 010 125
	19					✓			✓							✓	98m	985 170 001 026 972
	20						✓		✓					✓			46m	985 170 000 983 620
	21			✓					✓					✓			97m	985 170 001 029 229
	22						✓		✓							✓	115m	985 170 001 012 794
	23						✓		✓					✓			110m	985 170 000 983 481
	24				✓				✓							✓	110m	985 170 001 026 575
	25						✓		✓							✓	30m	985 170 001 010 037
	26				✓				✓					✓			120m	985 170 001 006 088
	27		✓						✓					✓			120m	985 170 001 010 976
	28						✓		✓					✓			110m	985 170 000 982 901
	29					✓			✓							✓	98m	985 170 000 983 020
	30						✓		✓					✓			115m	985 170 001 026 086
	31					✓			✓					✓			120m	985 170 000 986 217
	32					✓			✓					✓			120m	985 170 001 016 462
	33						✓				✓					✓	110m	985 170 001 009 942
	34		✓						✓					✓			99m	985 170 001 029 490
USGN	35						✓		✓					✓			30m	985 170 001 001 818
	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 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).



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

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

Originating Office Phone

210-719-0000

Control Number: 8101B0325

Office Id: 978101

Rathke'S Vet Clinic
404 Converse
Del Rio TX 78840

Service Date(s)
Begin: 18-MAR-11
End: 24-MAR-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759781177 0250	52.00	7.00	364.00

Total Due \$ 364.00

Remarks: 17-140's T11-18247 @ T11-18251, T11-18271, T11-18272

Payment Information

Nfc Id 451522562VA

Date	Amount	Payment Type	Account/Check #
25-MAR-11	\$ 364.00	Credit Acct	

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.

cut

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: Mexico aceptara este envio de caballos solamente si la forma VS FORM 10-13 y la declaracion jurada estan completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El numero de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. Mexico no aceptara machos sin castrar ni monorchideos.

- Name and Address of Exporter:
 Nombre y Direccion del Exportador: (b)(6) TX (b)(6)
- Name and Address of Importer:
 Nombre y Direccion del Importador: **Inter Meats, S.A.DE C.V.
 AV. Universidad NO. 602 Int.19
 Union Ganadera
 Aguascalientes,AGS. C.P. 20103
 R.F.C.: IME080619P83**

3. Identification of the animals to be exported / *Identificacion de los animales a ser exportados.* **All Microchips are on Left side Top of Neck.**

Microchip number / Numero de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Numero de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USFS 7131 985170001099678	Mare	120 Months	USFS 7141 985170001083240	Mare	144 Months
USFS 7132 985170001048039	Mare	120 Months	USFS 7142 985170001098472	Gelding	96 Months
USFS 7133 985170001074626	Gelding	96 Months	USFS 7143 985170001100854	Mare	96 Months
USFS 7134 985170001101391	Mare	120 Months	USFS 7144 985170001053807	Mare	48 Months
USFS 7135 985170001100566	Mare	120 Months	USFS 7145 985170001042012	Gelding	72 Months
USFS 7136 985170001048013	Mare	48 Months	USFS 7146 985170001098384	Mare	48 Months
USFS 7137 985170001049104	Mare	72 Months	USFS 7147 985170001040481	Gelding	72 Months
USFS 7138 985170001054659	Mare	120 Months	USFS 7148 985170001098101	Gelding	120 Months
USFS 7139 985170001048855	Mare	120 Months	USFS 7149 985170001045709	Gelding	72 Months
USFS 7140 985170001090595	Mare	96 Months	USFS 7150 985170001092317	Mare	60 Months

3/22/11

Microchip number / Numero de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Numero de microchip	Sex / Sexo	Approximate age/ Eda d aproximada
USFS 7093 985170001098820	Mare	48 Months	USFS 7098 985170001051517	Mare	48 Months
USFS 7094 985170001049175	Mare	96 Months	USFS 7099 985170001090587	Mare	72 Months
USFS 7095 985170001043495	Mare	96 Months	USFS 7100 985170001090273	Mare	48 Months
USFS 7096 985170001053665	Mare	96 Months	USFS 7249 985170001044154	Gelding	72 Months
USFS 7097 985170001051554	Mare	72 Months	USFS 7250 985170001083541	Mare	24 Months

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspeccion efectuada por un veterinario oficial dentro de los 30 dias previos a la exportation, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspeccion **3/19/2011**

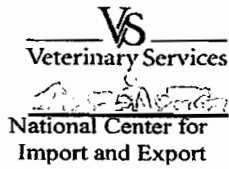
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehiculos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfeccion antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 dias previos a la exportacion, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiologicamente con instalaciones o animales infectados.

USDA



Health Certificate No. 72117502
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

cek

[The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks]
os animales estan libres de ectopatasitos y provienen de areas no cuarentenadas por garrapatas Boophilus spp]

Khris Crowe, DVM

Name of Accredited Veterinarian
*Nombre del Medico Veterinario
Acreditado*

Date: March 20th, 2011

W H BROWN DVM

Name of Endorsing Federal Veterinarian
*Nombre del Medico Veterinario Federal
que endosa.*

(b)(6)

(b)(6)

3-22-11

*Signature of Accredited Veterinarian and Date
Firma del Medico Veterinario Acreditado y
Fecha*

*Signature of Endorsing Federal Veterinarian and Date
Firma del Medico Veterinario que endosa y Fecha*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Vdlido Solamente si el sello veterinario del USDA esta sobre la firma del Medico Veterinario Federal).*

Mexico, Slaughter horse HC

**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
MB NO.
0579-0160

7117502

TIME HORSES LOADED ON CONVEYANCE	DATE: 3/20/2011	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Whitesboro, TX
VEHICLE LICENSE NO. AND DRIVER'S NAME T 92 943 LD Sirman	NAME OF AUCTION/MARKET	
(b)(6)	CONSIGNEE (RECEIVER/DESTINATION) NAME Inter Meats, S.A. DE C.V.	
(b)(6)	STREET ADDRESS AV. Universidad NO. 602 INT. 19 Union Ganadera	
(b)(6) TX	CITY, STATE, ZIP CODE AGUASCALIENTES, AGS. C.P. 20130	
(b)(6)	AREA CODE & TELEPHONE NO. (626)453-3750	

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

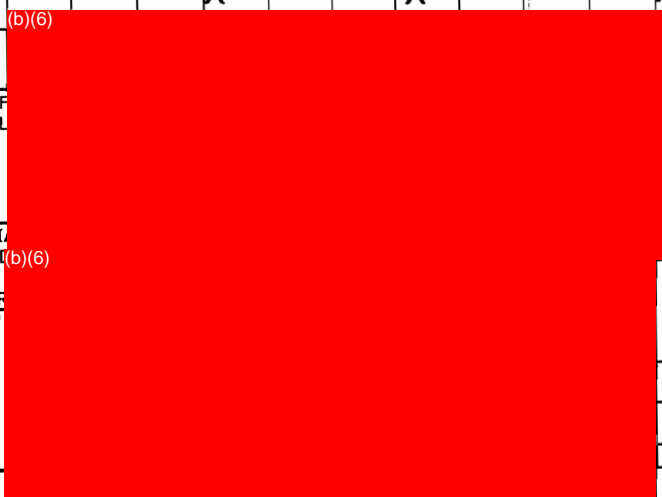
- Pregnant mares are not likely to foal (give birth) during the trip. Horses are able to bear weight on all 4 limbs.
 Foals are older than 6 months of age. Horses are not blind in both eyes. Horses are able to walk unassisted.

	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	USFS	7131						X		X				X			120 Months	985170001099678
2	USFS	7132			X					X				X			120 Months	985170001048039
3	USFS	7133						X		X						X	96 Months	985170001074626
4	USFS	7134					X			X				X			120 Months HR1065,JNP	985170001101391
5	USFS	7135						X		X				X			120 Months	985170001100566
6	USFS	7136						X		X				X			48 Months	985170001048013
7	USFS	7137					X			X				X			72 Months HR1221	985170001049104
8	USFS	7138						X		X				X			120 Months	985170001054659
9	USFS	7139					X			X				X			120 Months HR1039,JNP	985170001048855
10	USFS	7140					X			X				X			96 Months PE338	985170001090595
11	USFS	7141						X		X				X			144 Months PE164	985170001083240
12	USFS	7142					X			X						X	96 Months	985170001098472
13	USFS	7143					X			X				X			96 Months	985170001100854
14	USFS	7144					X			X				X			48 Months	985170001053807
15	USFS	7145														X	72 Months	985170001042012

HORSES HAVE HAD ACCESS TO PASTURE FOR AT LEAST 12 HOURS IMMEDIATELY BEFORE LOADING

SIGNATURE

I HEREBY AUTHORIZE THE CFIA TO USE THE INFORMATION COMPLETED BY THE CFIA OR I FOR THE PURPOSES OF THE ACT. USING A FALSIFIED FORM IS A VIOLATION OF THE ACT AND IS PUNISHABLE BY A FINE OF \$10,000 OR IMPRISONMENT FOR UP TO 5 YEARS OR BOTH. SIGNATURE OF OWNER/SHIPPER (in the best of my knowledge.)



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**
(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
MB NO.

0579-0160

7117502

TIME HORSES LOADED ON CONVEYANCE

DATE

3/20/2011

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Whitesboro, TX

(b)(6) LICENSE NO. AND CONSIGNEE'S NAME

NAME OF AUCTION/MARKET

(b)(6) NAME

CONSIGNEE (RECEIVER/DESTINATION)-NAME
Inter Meats, S.A. DE C.V.

STREET ADDRESS

AV. Universidad NO. 602 INT. 19 Union Ganadera

(b)(6) DE (b)(6)

CITY, STATE, ZIP CODE

AGUASCALIENTES, AGS. C.P. 20130

AREA CODE & TELEPHONE NO.

214-699-3460

AREA CODE & TELEPHONE NO.

(626)453-3750

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	
16	USFS	7146					X							X				48 Months	985170001098384
17	USFS	7147	X														X	72 Months	985170001040481
18	USFS	7148					X										X	120 Months	985170001098101
19	USFS	7149					X										X	72 Months	985170001045709
20	USFS	7150		X										X				60 Months	985170001092317
21	USFS	7093					X							X				48 Months	985170001098820
22	USFS	7094					X							X				96 Months	985170001049175
23	USFS	7095			X									X				96 Months	985170001043495
24	USFS	7096					X							X				96 Months HR740	985170001053665
25	USFS	7097					X							X				72 Months	985170001051554
26	USFS	7098					X							X				48 Months	985170001051517
27	USFS	7099					X							X				72 Months	985170001090587
28	USFS	7100	X											X				48 Months	985170001090273
29	USFS	724															X	72 Months	985170001044154
30	USFS	725												X				24 Months	985170001083541

HORSES HAVE HAD A
HOURS IMMEDIATELY

SIGNATURE

I HEREBY AUTHORIZE
COMPLETED BY THE
USING A FALSIFIED P
\$10,000 OR IMPRISONMENT FOR N
SIGNATURE OF OWNER/SHIPPER (' cer
the best of my knowledge.)

(b)(6)

IT AS
NGLY

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**
(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

1117503

TIME HORSES LOADED ON CONVEYANCE 7:00 pm	DATE 3-26-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
(b)(6)	NAME OF AUCTION/MARKET Perkins Ranch	
OWNER(S) (OWNER/SHIPPER) NAME Double JJ Horse Co	CONSIGNEE (RECEIVER/DESTINATION) NAME Alvarado Cattle Co	
STREET ADDRESS 2621 W 116th Street	STREET ADDRESS 1600 Cattle Dr	
CITY, STATE, ZIP CODE Perkins OK	CITY, STATE, ZIP CODE Presidio TX	
AREA CODE & TELEPHONE NO. 405 547 8337	AREA CODE & TELEPHONE NO. 432 295 1095	

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	USGW 4201	X								X				X			96 MONTHS	981020005329227
2	USGW 4202	X								X				X			108 MONTHS	981020005339989
3	USGW 4203	X								X				X			48 MONTHS	981020005360131
4	USGW 4204	X								X				X			96 MONTHS	981020005351644
5	USGW 4205	X								X				X			132 MONTHS	981020005354371
6	USGW 4206	X								X					X		48 MONTHS	981020005355604
7	USGW 4207	X								X					X		72 MONTHS	981020005350114
8	USGW 4208	X								X					X		36 MONTHS	981020005352819
9	USGW 4209	X								X					X		60 MONTHS	981020005338290
10	USGW 4210	X								X					X		24 MONTHS	981020005351808
11	USGW 4211			X						X				X			60 MONTHS	981020005331914
12	USGW 4212			X						X				X			144 MONTHS	981020005357360
13	USGW 4213			X						X				X			96 MONTHS	981020005346315
14	USGW 4214			X						x					X		84 MONTHS	981020005341026
15	USGW 4215			X						X					X		108 MONTHS	981020005353587

(b)(6)	FOR A MINIMUM OF 6 CONSECUTIVE DAYS.	CANADIAN FOOD INSPECTION AGENCY (CFIA) EST. _____ DATE _____ TIME _____
	STATEMENT AND THE INFORMATION IN IT AS CERTIFICATION OF THIS FORM OR KNOWINGLY MAY RESULT IN A FINE OF NOT MORE THAN \$500 OR BOTH (18 U.S.C. SECTION 1001).	DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF) EST. _____ DATE _____ TIME _____
SIGNATURE (b)(6) the best	contained in this form is true and correct to	

**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

71117503

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	USGW 4216			X					X						X	72 MONTHS	981020005333271	
17	USGW 4217			X					X						X	24 MONTHS	981020005353564	
18	USGW 4218				X				X				X			48 MONTHS	981020005340221	
19	USGW 4219				X				X				X			132 MONTHS	981020005329243	
20	USGW 4220				X				X					X		36 MONTHS	981020005333534	
21	USGW 4221					X			X				X			60 MONTHS	981020005350559	
22	USGW 4222					X			X				X			96 MONTHS	981020005346485	
23	USGW 4223					X			X				X			108 MONTHS	981020005339503	
24	USGW 4224					X			X				X			84 MONTHS	981020005359386	
25	USGW 4225					X			X				X			96 MONTHS	981020005335081	
26	USGW 4226					X			X				X			36 MONTHS	981020005352981	
27	USGW 4227					X			X				X			108 MONTHS	981020005331434	
28	USGW 4228					X			X					X		84 MONTHS	981020005334591	
29	USGW 4229					X			X					X		24 MONTHS	981020005336482	
30	USGW 4230					X			X					X		72 MONTHS	981020005341474	
31	USGW 4231					X			X					X		96 MONTHS	981020005339608	
32	USGW 4232						X		X				X			48 MONTHS	981020005333891	
33	USGW 4233						X		X				X			84 MONTHS	981020005328653	
34	USGW 4234						X		X					X		24 MONTHS	981020005330422	
35	USGW 4235						X		X					X		108 MONTHS	981020005334988	
36	USGW 4236	X							X				X			96 MONTHS	981020005356029	
37	USGW 4237	X							X					X		132 MONTHS	981020005352442	
38	USGW 4238					X			X				X			36 MONTHS	981020005359013	
39	USGW 4239					X			X					X		72 MONTHS	981020005345155	
40	USGW 4240						X		X				X			84 MONTHS	981020005351438	
41																		
42																		
43																		
44																		
45																		

I HEREBY AUTH (b)(6)
OF THIS FORM
IMPRISONMENT

SIGNATURE OF

AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR C. SECTION 1001).

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

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

Originating Office Phone
512-383-2411

Control Number: 4801B7092
Office Id: 974801

(b)(6)

Service Date(s)
Begin: 22-MAR-11
End: 22-MAR-11

TX (b)(6)

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759748177 0250	52.00	2.00	104.00

Total Due \$ 104.00

Remarks: Health Certificate # 1117502

Payment Information

Nfc Id 9999999999V

Date	Amount	Payment Type	Account/Check #
31-MAR-11	\$ 104.00	Check	1044

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.

(b)(6)

1044

88-1406/1123

(b)(6) TX (b)(6)

3-22-11

Date

Pay to the Order of

USPA

\$104.00

On Hand + Fund

Dollars

Security Features Details on Back

FORT DAVIS STATE BANK
PRESIDIO, TEXAS 79845



(b)(6)

For (b)(6)

Service Date

3/22/2011

Whitesboro, TX 76273

GUARDIAN SAFETY® BLUE

Code	Description	Unit Cost	# of Units	Total Dollars
1	HCT 1117502	\$52.00	(30hd) 1	\$52.00
2				
3				
4				
5	HCT 111 7503			
6				
Total Due				\$52.00

104

Payment Information

Date	Amount	Payment Type	Account / Check #
Check # 1044 is For two statements		On Account	
3/22/2011	\$104.00	Check	1044
		CASH	
		Money Order	
		Credit Card	

480157092

PRESIDIO I PORT / HORSE EXPORT

Name and Address of Remitter:

Service Date

(b)(6)
 (b)(6) TX (b)(6)

3/22/2011

Code	Description	Unit Cost	# of Units	Total Dollars
1	HC T 1117502	\$52.00	(30hd) 1	\$52.00
2				
3				
4				
5	HC T 111 7503			
6				
Total Due				\$52.00

104

Payment Information

Date	Amount	Payment Type	Account / Check #
Check # 1044 is For two statements		On Account	
3/22/2011	\$104.00	Check	1044
		CASH	
		Money Order	
		Credit Card	

480157092

PRESIDIO P PORT / HORSE EXPORT

Name and Address of Remitter:

Service Date

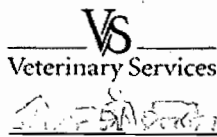
**Double JJ Horse Co.
2621 W 116 th St
Perkins Ok 74059**

Begin:3-22-11

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	
1	HC T1117503	\$52.00	(40hd) 1	\$52.00
2				
3				
4				
5				
6				
				Total Due \$52.00

Payment Information

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
		On Account	
3/22/2011	\$104.00	Check	1044
		CASH	
		Money Order	
		Credit Card	



**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**McDaniel & Son
 1572 CR 35020
 Brookston, TX 75421**

2. Name and Address of Importer:

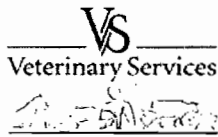
Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/ <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>
USGV 5251 981020005267632	Mare	72 Months	USGV 5259 981020005296178	Gelding	60 Months
USGV 5252 981020005286095	Mare	60 Months	USGV 5260 981020005283666	Mare	72 Months
USGV 5253 981020005295804	Mare	108 Months	USGV 5261 981020005284465	Mare	72 Months
USGV 5254 981020005282235	Gelding	96 Months	USGV 5262 981020005267054	Mare	108 Months
USGV 5255 981020005268841	Mare	60 Months	USGV 5263 981020005280024	Mare	120 Months
USGV 5256 981020005268843	Mare	108 Months	USGV 5264 981020005275089	Gelding	96 Months
USGV 5257 981020005291319	Mare	72 Months	USGV 5265 981020005284156	Gelding	72 Months
USGV 5258 981020005286395	Mare	96 Months	USGV 5266 981020005291021	Mare	108 Months

B/16/11



Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGV 5267 981020005278733	Gelding	96 Months	USGV 5274 981020005275523	Gelding	108 Months
USGV 5268 981020005292860	Mare	108 Months	USGV 5275 981020005262874	Gelding	96 Months
USGV 5269 981020005294868	Gelding	96 Months	USGV 5276 981020005253287	Gelding	120 Months
USGV 5270 981020005278297	Mare	84 Months	USGV 5277 981020005243347	Gelding	72 Months
USGV 5271 981020005270729	Mare	72 Months	USGV 5278 981020005258385	Mare	84 Months
USGV 5272 981020005288048	Gelding	84 Months	USGV 5279 981020005256474	Mare	96 Months
USGV 5273 981020005290686	Mare	96 Months	USGV 5280 981020005250938	Mare	72 Months

CERTIFICATION STATEMENTS / CERTIFICACIONES

- Horses originate from the United States.
Los animales son originarios de Estados Unidos.
- Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / Fecha de inspección 3/11/11
- Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.
- During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-16568
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Page 3 of 4

(Delete as appropriate / Remueva lo que no aplique)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.]

[Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.]

Name of Accredited Veterinarian

Nombre del Médico Veterinario

Acreditado
Denise Fowler

Name of Endorsing Federal Veterinarian

Nombre del Médico Veterinario

Federal que endosa
[Signature]

(b)(6)
[Redacted Signature]

1/11
and Date

Firma del Médico Veterinario Acreditado
y Fecha

(b)(6)
[Redacted Signature]

14 MAR 11
Signature of Endorsing Federal
and Date

Firma del Médico Veterinario que endosa
y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).

AFFIDAVIT
DECLARACIÓN JURADA

Page 4 of 4

I (print) ^{(b)(6)} _____ declare that the horses included in this shipment and accompanied by the health certificate number T11-16568 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número T11-16568 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

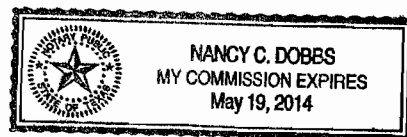
Date and signature of the exporter
Fecha y firma del exportador

^{(b)(6)} _____

Feb 28, 2011

Date and signature of the Notary Public
Fecha y firma del Notario Público

Nancy C. Dobbs - Feb. 28, 2011



**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
T11-16568

TIME HORSES LOADED ON CONVEYANCE 8:30 P.M.	DATE 3-13-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Brookston, Texas 75421
NAME OF AUCTION/MARKET N/A		
CONSIGNOR (OWNER/SHIPPER) NAME McDaniel & Son	CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.	
STREET ADDRESS 1572 CR 35020	STREET ADDRESS Carretera Jerez Sanchez Roman KM 27.5	
CITY, STATE, ZIP CODE Brookston, Texas 75421	CITY, STATE, ZIP CODE Jerez, Zacatecas, Mexico, C.P. 99380	
AREA CODE & TELEPHONE NO. 903-784-6862	AREA CODE & TELEPHONE NO. 011 52 81 81 58 1700	

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.
 Horses are able to walk unassisted.
- Foals are older than 6 months of age.
 Horses are not blind in both eyes.

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc. Age	REMARKS Include existing conditions Chip #	
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld			
1	USGV	5251						Sr	X					X				72	981020005267632
2	USGV	5252						Sr	X					X				60	981020005286095
3	USGV	5253						Sr	X					X				108	981020005295804
4	USGV	5254						Pt	X							X		96	981020005282235
5	USGV	5255						Sr	X					X				60	981020005268841
6	USGV	5256						Pt	X					X				108	981020005268843
7	USGV	5257						Sr	X					X				72	981020005291319
8	USGV	5258						Sr	X					X				96	981020005286395
9	USGV	5259						Sr	X							X		60	981020005296178
10	USGV	5260						Pt	X					X				72	981020005283666
11	USGV	5261						Pt	X					X				72	981020005284465
12	USGV	5262						Sr	X					X				108	981020005267054
13	USGV	5263						Sr	X					X				120	981020005280024
14	USGV	5264						Sr	X							X		96	981020005275089
15	USGV	5265	X						X							X		72	981020005284156

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

SIGNATURE (b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____
DATE _____
TIME _____

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).

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____
DATE _____
TIME _____

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)

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

T11-16568

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

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc. Age	REMARKS Include precondition Chip #	
			Bay	Grey	Bk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld			
16	USGV	5266						Pt		X				X				108	981020005291021
17	USGV	5267						Sr		X						X		96	981020005278733
18	USGV	5268						Pt		X				X				108	981020005292860
19	USGV	5269						Sr		X						X		96	981020005294868
20	USGV	5270						Sr		X				X				84	981020005278297
21	USGV	5271						Sr		X				X				72	981020005270729
22	USGV	5272						Sr		X						X		84	981020005288048
23	USGV	5273						Sr		X				X				96	981020005290686
24	USGV	5274						Pt		X						X		108	981020005275523
25	USGV	5275						Pt		X						X		96	981020005262874
26	USGV	5276						Pt		X						X		120	981020005253287
27	USGV	5277						Sr		X						X		72	981020005243347
28	USGV	5278						Pt		X				X				84	981020005258385
29	USGV	5279						Sr		X				X				96	981020005256474
30	USGV	5280						Sr		X				X				72	981020005250938
31																			
32																			
33																			
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35																			
36																			
37																			
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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 (b)(6) _____ form is true and correct to the best of my knowledge.)



Health Certificate No. **T11-16569**
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Page 1 of 5

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**McDaniel & Son
 1572 CR 35020
 Brookston, TX 75421**

2. Name and Address of Importer:

Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGV 5151 981020005241254	Mare	72 Months	USGV 5159 981100002589259	Mare	72 Months
USGV 5152 981020005235890	Mare	108 Months	USGV 5160 981100002587213	Mare	48 Months
USGV 5153 981020005253632	Mare	120 Months	USGV 5161 981100002590179	Mare	72 Months
USGV 5154 981020005244305	Mare	72 Months	USGV 5162 981020005252822	Mare	84 Months
USGV 5155 981020005311553	Gelding	60 Months	USGV 5163 981100002582175	Mare	108 Months
USGV 5156 981020005250226	Mare	108 Months	USGV 5164 981100002589026	Gelding	48 Months
USGV 5157 981100002413353	Mare	60 Months	USGV 5165 981100002587097	Gelding	60 Months
USGV 5158 981100002581314	Mare	84 Months	USGV 5166 981100002588981	Gelding	96 Months



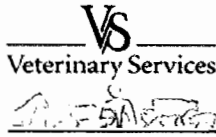
Health Certificate No. T11-16569
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Page 2 of 5

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/Edad aproximada
USGV 5167 981100002580790	Mare	60 Months	USGV 5174 981100002589030	Mare	60 Months
USGV 5168 981100002576066	Mare	72 Months	USGV 5175 981100002585338	Gelding	72 Months
USGV 5169 981098102768500	Mare	84 Months	USGV 5176 981100002584637	Mare	108 Months
USGV 5170 981100002587863	Mare	96 Months	USGV 5177 981100002571102	Mare	72 Months
USGV 5171 981100002575076	Mare	72 Months	USGV 5178 981100002577623	Gelding	72 Months
USGV 5172 981100002589385	Mare	108 Months	USGV 5179 981100002578177	Mare	108 Months
USGV 5173 981100002578937	Gelding	120 Months	USGV 5180 981100002575780	Gelding	72 Months

CERTIFICATION STATEMENTS / CERTIFICACIONES

- Horses originate from the United States.
Los animales son originarios de Estados Unidos.
- Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
Inspection date / *Fecha de inspección* 3/14/11
- Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.
- During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.

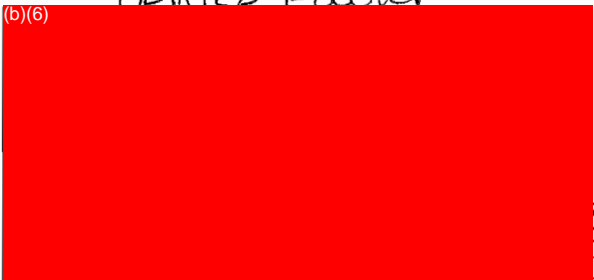


Health Certificate No. T11-16569
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)


(Delete as appropriate / *Remueva lo que no aplique*)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.]
[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*]

Name of Accredited Veterinarian
Nombre del Médico Veterinario
Acreditado

Denise Fowler


Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario
Federal que endosa

HL Vept


3/14/11
Date

16 MAR 11
Signature of Endorsing Federal Veterinarian and Date
Firma del Médico Veterinario que endosa y Fecha

Firma del Médico Veterinario Acreditado y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

AFFIDAVIT
DECLARACIÓN JURADA

Page 5 of 5

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number T11-16569 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número T11-16569 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

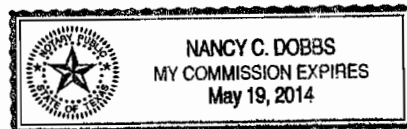
Date and signature of the exporter
Fecha y firma del exportador

(b)(6)

March 11, 2011

Date and signature of the Notary Public
Fecha y firma del Notario Público

Nancy C. Dobbs March 11, 2011



**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
T11-16569

TIME HORSES LOADED ON CONVEYANCE
8:30 P.M.
DATE
3-15-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
Brookston, Texas 75421

(b)(6)

NAME OF AUCTION/MARKET
N/A

CONSIGNOR (OWNER/SHIPPER) NAME
McDaniel & Son

CONSIGNEE (RECEIVER/DESTINATION) NAME
Carnicos de Jerez, S.A. de C.V.

STREET ADDRESS
1572 CR 35020

STREET ADDRESS
Carretera Jerez Sanchez Roman KM 27.5

CITY, STATE, ZIP CODE
Brookston, Texas 75421

CITY, STATE, ZIP CODE
Jerez, Zacatecas, Mexico, C.P. 99380

AREA CODE & TELEPHONE NO.
903-784-6862

AREA CODE & TELEPHONE NO.
011 52 81 81 58 1700

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. Age	REMARKS Include existing conditions Chip #	
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld			
1	USGV	5151	X							X					X			72	981020005241254
2	USGV	5152	X								X				X			108	981020005235890
3	USGV	5153	X								X				X			120	981020005253632
4	USGV	5154							Dn		X				X			72	981020005244305
5	USGV	5155							Sr		X						X	60	981020005311553
6	USGV	5156	X								X				X			108	981020005250226
7	USGV	5157							Sr		X				X			60	981100002413353
8	USGV	5158		X							X				X			84	981100002581314
9	USGV	5159							Sr		X				X			72	981100002589259
10	USGV	5160							Pt		X				X			48	981100002587213
11	USGV	5161		X							X				X			72	981100002590179
12	USGV	5162							Sr		X				X			84	981020005252822
13	USGV	5163							Sr		X				X			108	981100002582175
14	USGV	5164							Sr		X						X	48	981100002589026
15	USGV	5165		X							X						X	60	981100002587097

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

SIGNATURE
(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 _____

**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
T11-16569

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc. Age	REMARKS Include precondition chip #		
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld				
16	USGV	5166	X														X	96	981100002588981	
17	USGV	5167		X														X	60	981100002580790
18	USGV	5168							Pl									X	72	981100002576066
19	USGV	5169							Sr									X	84	981098102768500
20	USGV	5170		X														X	96	981100002587863
21	USGV	5171							Sr									X	72	981100002575076
22	USGV	5172			X													X	108	981100002589385
23	USGV	5173							Sr								X	120	981100002578937	
24	USGV	5174			X													X	60	981100002589030
25	USGV	5175							Sr								X	72	981100002585338	
26	USGV	5176							Pl									X	108	981100002584637
27	USGV	5177	X															X	72	981100002571102
28	USGV	5178			X												X	72	981100002577623	
29	USGV	5179	X															X	108	981100002578177
30	USGV	5180							Sr								X	72	981100002575780	
31	USGV	5181							Rn									X	84	981100002573106
32																				
33																				
34																				
35																				
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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 (b)(6) this form is true and correct to the best of my knowledge.

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

Originating Office Phone

210-719-0000

Control Number: 8101B0315

Office Id: 978101

Mc Daniel & Son

1572 Cr 35020

Brookston

TX 75421

Service Date(s)

Begin: 14-MAR-11

End: 16-MAR-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759781177 0250	52.00	2.00	104.00

Total Due \$ 104.00

Remarks: 17-140's T11-16568, T11-16569

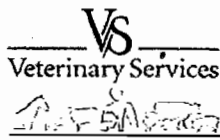
Payment Information

Nfc Id 9999999999V

Date	Amount	Payment Type	Account/Check #
17-MAR-11	\$ 52.00	Money Order	3192194268
17-MAR-11	\$ 52.00	Money Order	20309318464

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.



Health Certificate No. T11-18245
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**B & B Trading Co
 996 Vista Hermosa
 Eagle Pass, Texas 78852**

2. Name and Address of Importer:

Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0951 985170000993191	NEUTER	108 MONTHS	USGN 0959 985170000993684	FEMALE	48 MONTHS
0952 985170001039714	NEUTER	108 MONTHS	0960 985170000998256	FEMALE	72 MONTHS
0953 985170000994133	NEUTER	96 MONTHS	0961 985170001039966	NEUTER	72 MONTHS
0954 985170001015342	FEMALE	120 MONTHS	0962 985170001046496	FEMALE	108 MONTHS
0955 985170001012502	NEUTER	96 MONTHS	0963 985170000983685	NEUTER	108 MONTHS
0956 985170001002036	NEUTER	108 MONTHS	0964 985170000994002	FEMALE	120 MONTHS
0957 985170000993733	NEUTER	120 MONTHS	0965 985170000989996	NEUTER	132 MONTHS
0958 985170001044599	NEUTER	96 MONTHS	0966 985170001029326	NEUTER	120 MONTHS

Mexico, Slaughter horse HC

3/14/11



Health Certificate No. T11-18245
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0967 985170000993277	NEUTER	120 MONTHS	USGN 0974 985170001022745	NEUTER	96 MONTHS
0968 985170001011773	FEMALE	96 MONTHS	0975 985170001028829	FEMALE	120 MONTHS
0969 985170001010390	FEMALE	96 MONTHS	0976 985170001026998	NEUTER	120 MONTHS
0970 985170000992414	FEMALE	72 MONTHS	0977 985170001027364	NEUTER	132 MONTHS
0971 985170001012672	FEMALE	72 MONTHS	0978 985170001026593	NEUTER	120 MONTHS
0972 985170001011345	FEMALE	108 MONTHS	0979 985170000982761	FEMALE	96 MONTHS
0973 985170000982825	NEUTER	96 MONTHS	0980 985170000983839	FEMALE	96 MONTHS

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

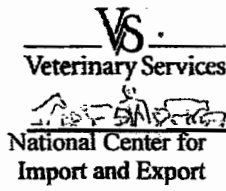
Inspection date / Fecha de inspección 3/14/11

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-18245
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.]

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*].

RATHKE, HERMAN, L. DVM

Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

VOGT, H.L. DVM

Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario Federal que endosa.

(b)(6)

Signature of Accredited Veterinarian and Date
Veterinarian
*Firma del Médico Veterinario Acreditado
y Fecha 3/14/11*

Signature of Endorsing Federal Veterinarian
*Firma del Médico Veterinario Federal
y Fecha 3/14/11*

(b)(6)

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

Mexico, Slaughter horse HC

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

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 8 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

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

TIME HORSES LOADED ON CONVEYANCE
9:00 PM

DATE
3-12-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
Northham TX

NAME OF AUCTION/MARKET
N/A

(b)(6)

CONSIGNEE (RECEIVER/DESTINATION) NAME
Camino de Jerez S.A. de C.V.

CONSIGNEE STREET ADDRESS
D.L. TRAINING CO.
946 N. Higuera
CITY, STATE, ZIP CODE
Corte Ross TX 71852
AREA CODE & TELEPHONE NO.
830 757-6404

CONSIGNEE STREET ADDRESS
Camino de Jerez S.A. de C.V.
CITY, STATE, ZIP CODE
Jerez Zacatecas Mexico C.P. 99380
AREA CODE & TELEPHONE NO.
449 45-40-44

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.
- Horses 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	61																985 170 000 993 191	
2	62																985 170 001 039 714	
3	53																985 170 000 994 133	
4	54																985 170 001 015 342	
5	55																985 170 001 012 502	
6	56																985 170 001 002 036	
7	57																985 170 000 993 733	
8	58																985 170 001 044 599	
9	59																985 170 000 993 684	
10	60																985 170 000 998 256	
11	61																985 170 001 039 966	
12	62																985 170 001 046 496	
13	63																985 170 000 983 685	
14	64																985 170 000 994 002	
15	65																985 170 000 989 996	

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

SIGNATURE

(b)(6)

I HEREBY CERTIFY THAT THE INFORMATION AND THE INFORMATION IN IT AS COMPLETELY TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. 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 and belief.)

(b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____
DATE _____
TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____
DATE _____
TIME _____

Previous editions are obsolete

PAGE 1 OF ...

PART 1 - INSPECTOR

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)

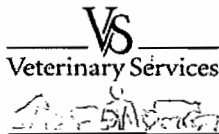
According to the Paperwork Reduction Act of 1986, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated 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	Chest	Other	TB	QT	Draft	Pony	Other	Mare	Stall	Geld			
16	MSB 0966					✓			✓							✓	120H	985 170 001 029 326
17	67				✓				✓							✓	120H	985 170 000 993 277
18	68	✓							✓				✓			✓	96H	985 170 001 011 773
19	69	✓							✓				✓			✓	96H	985 170 001 010 390
20	70					✓			✓				✓			✓	75H	985 170 000 992 414
21	71				✓				✓				✓			✓	72H	985 170 001 012 672
22	72				✓				✓				✓			✓	108H	985 170 001 011 345
23	73					✓			✓				✓			✓	96H	985 170 000 982 825
24	74								✓				✓			✓	96H	985 170 001 022 745
25	75	✓							✓				✓			✓	120H	985 170 001 028 826
26	76	✓							✓				✓			✓	120H	985 170 001 026 991
27	77	✓							✓				✓			✓	122H	985 170 001 027 364
28	78								✓				✓			✓	120H	985 170 001 026 593
29	79	✓							✓				✓			✓	96H	985 170 000 982 761
30	80	✓							✓				✓			✓	96H	985 170 000 983 839
31	81								✓				✓			✓	96H	985 170 000 999 659
32	82				✓				✓				✓			✓	96H	985 170 000 984 365
33	MSB 83	✓							✓				✓			✓	108H	985 170 001 037 287
34																		
35																		
36																		
37																		
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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)

(b)(6) [Redacted Signature] of the information contained in this form is true and correct to the best of my knowledge.



Health Certificate No. T11-18244
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

**B & B Trading Co
 996 Vista Hermosa
 Eagle Pass, Texas 78852**

2. Name and Address of Importer:

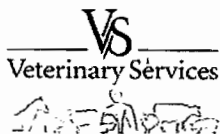
Nombre y Dirección del Importador:

**Carnicos de Jerez, S.A. de C.V.
 Carratera Jerez Sanchez Roman KM 27.5
 Jerez, Zacatecas, Mexico C.P. 99380**

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/ <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>
USGN 0376 98517000984978	FEMALE	96 MONTHS	USGN 0384 985170001028183	FEMALE	96 MONTHS
0377 985170001010901	FEMALE	96 MONTHS	0385 985170001007904	FEMALE	108 MONTHS
0378 985170001026001	FEMALE	108 MONTHS	0386 985170000995362	NEUTER	120 MONTHS
0379 985170001038472	NUETER	120 MONTHS	0387 985170000993910	FEMALE	132 MONTHS
0380 985170001028172	FEMALE	120 MONTHS	0388 985170001013710	NEUTER	120 MONTHS
0381 985170001028388	FEMALE	132 MONTHS	0389 985170001008478	NUETER	120 MONTHS
0382 985170001006620	NEUTER	96 MONTHS	0390 985170000995026	FEMALE	132 MONTHS
0383 985170001038209	NEUTER	84 MONTHS	0391 985170000995010	NEUTER	72 MONTHS

Mexico, Slaughter horse HC



Health Certificate No. T11-18244
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGN 0392 985170001012747	NEUTER	84 MONTHS	USGN 0399 985170000994368	NEUTER	108 MONTHS
0393 985170000995479	FEMALE	120 MONTHS	0400 985170000993679	NEUTER	96 MONTHS
0394 985170000994833	NEUTER	96 MONTHS	4836 985170001024387	FEMALE	120 MONTHS
0395 985170000993169	NEUTER	72 MONTHS	4837 985170001010059	NEUTER	120 MONTHS
0396 985170000994471	FEMALE	96 MONTHS	4838 985170000992881	NEUTER	132 MONTHS
0397 985170001025147	NEUTER	108 MONTHS	4839 985170001003855	FEMALE	96 MONTHS
0398 985170001014288	NEUTER	108 MONTHS	4840 985170001013540	FEMALE	84 MONTHS

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección 3/11/11

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-18244
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.]

[Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.].

RATHKE, HERMAN, L. DVM

Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

(b)(6)

Veterinarian
*Firma del Médico Veterinario Acreditado
y Fecha 3/11/11*

VOGT, H.L. DVM

Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)

Signature of Endorsing Federal
*Firma del Médico Veterinario q
y Fecha 3/11/11*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal*).

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 9:00 AM DATE 3-09-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE RAHMAN TX

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

NAME OF AUCTION/MARKET RA

CONSIGNOR (OWNER/SHIPPER) NAME OXB TRADING CO.

CONSIGNEE (RECEIVER/DESTINATION) NAME CARNIOS DE JEREZ S.A. de C.V.

STREET ADDRESS 996 Vista Hermosa

STREET ADDRESS Carretera Jerez Sanchez Roman Km 27.5

CITY, STATE, ZIP CODE Engle Pass TX 78852

CITY, STATE, ZIP CODE JEREZ Zacatecas Mexico C.P. 99380

AREA CODE & TELEPHONE NO. 830 757-6404

AREA CODE & TELEPHONE NO. 409 45-40-46

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	NSBN 0376					✓			✓					✓			96M	985 170 000 984 978
2	77						✓		✓					✓			96M	985 170 001 010 901
3	78		✓						✓					✓			108M	985 170 001 026 001
4	79	✓							✓								120M	985 170 001 038 472
5	80					✓			✓					✓			120M	985 170 001 028 172
6	81					✓			✓					✓			132M	985 170 001 028 388
7	82	✓							✓								126M	985 170 001 006 620
8	83						✓		✓								84M	985 170 001 038 209
9	84						✓						✓	✓			96M	985 170 001 028 183
10	85					✓			✓					✓			108M	985 170 001 007 904
11	86				✓				✓					✓			120M	985 170 000 995 362
12	87					✓			✓					✓			132M	985 170 000 993 910
13	88						✓		✓					✓			120M	985 170 001 013 710
14	89						✓		✓					✓			120M	985 170 001 008 478
15	NSBN 90	✓							✓					✓			132M	985 170 000 995 026

HOLD FOR A MINIMUM OF 6 CONSECUTIVE DAYS. SIGNATURE (b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)
EST. _____
DATE _____
TIME _____

THE INFORMATION CONTAINED IN THIS DOCUMENT AND THE INFORMATION IN IT WAS 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).

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

STATEMENT: (b)(6) 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

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

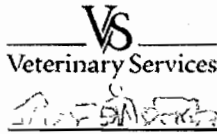
**OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)**

(Please type or print in ink)

	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	HSB	0391		✓													✓ 12M	985 170 000 995 010	
17		92					✓										✓ 14M	985 170 001 012 747	
18		93						✓									✓ 12M	985 170 000 995 479	
19		94						✓									✓ 96M	985 170 000 994 833	
20		95				✓											✓ 75M	985 170 000 993 169	
21		96					✓										✓ 96M	985 170 000 994 471	
22		97	✓														✓ 10M	985 170 001 025 147	
23		98						✓									✓ 10M	985 170 001 014 288	
24		99	✓														✓ 10M	985 170 000 994 368	
25		0400					✓										✓ 96M	985 170 000 993 679	
26		4236	✓														✓ 120M	985 170 001 024 387	
27		37					✓										✓ 120M	985 170 001 010 059	
28		38						✓									✓ 132M	985 170 000 992 881	
29		39					✓										✓ 96M	985 170 001 003 855	
30		40					✓										✓ 84M	985 170 001 013 540	
31		41	✓														✓ 14M	985 170 001 027 451	
32		42				✓											✓ 120M	985 170 000 993 867	
33		43				✓											✓ 120M	985 170 000 993 182	
34	HSB	44				✓											✓ 120M	985 170 000 983 867	
35																			
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37																			
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39																			
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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).

(b)(6) that the information contained in this form is true and correct to the best of my knowledge.)



Health Certificate No. T11-16567
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Page 1 of 5

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter:

Nombre y Dirección del Exportador:

McDaniel & Son

1572 CR 35020

Brookston, TX 75421

2. Name and Address of Importer:

Nombre y Dirección del Importador:

Carnicos de Jerez, S.A. de C.V.

Carratera Jerez Sanchez Roman KM 27.5

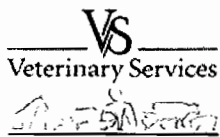
Jerez, Zacatecas, Mexico C.P. 99380

3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGV 6451 981100002582355	Mare	96 Months	USGV 6459 981100002590286	Mare	84 Months
USGV 6452 981100002585540	Mare	96 Months	USGV 6460 981100002589898	Mare	72 Months
USGV 6453 981100002578645	Mare	108 Months	USGV 6461 981100002581941	Mare	72 Months
USGV 6454 981100002588476	Mare	96 Months	USGV 6462 981100002581411	Mare	108 Months
USGV 6455 981100002589911	Mare	72 Months	USGV 6463 981100002590405	Mare	72 Months
USGV 6456 981100002580568	Mare	48 Months	USGV 6464 981100002581793	Mare	108 Months
USGV 6457 981100002585623	Mare	84 Months	USGV 6465 981100002588254	Mare	60 Months
USGV 6458 981100002589000	Mare	96 Months	USGV 6466 981100002587793	Mare	60 Months

Mexico, Slaughter horse HC

3/11/11



Health Certificate No. T11-16567
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Page 2 of 5

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USGV 6467 981020005294387	Mare	12 Months	USGV 6474 981020005281870	Gelding	84 Months
USGV 6468 981020005265607	Mare	12 Months	USGV 6475 981020005276209	Gelding	72 Months
USGV 6469 981020005281117	Mare	108 Months	USGV 6476 981020005264415	Mare	108 Months
USGV 6470 981020005284226	Mare	72 Months	USGV 6477 981020005294436	Gelding	96 Months
USGV 6471 981020005285969	Mare	108 Months	USGV 6478 981020005265912	Gelding	60 Months
USGV 6472 981020005277523	Mare	96 Months	USGV 6479 981020005273576	Mare	72 Months
USGV 6473 981020005293290	Gelding	72 Months	USGV 6480 981020005265570	Gelding	108 Months

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección 3/10/11

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. T11-16567
(Valid only if the USDA Veterinary Seal
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Page 4 of 5

(Delete as appropriate / *Remueva lo que no aplique*)

5. [The animals are free of ectoparasite and originated from areas not under quarantine for *Boophilus* spp ticks.]

[*Los animales están libres de ectoparásitos y provienen de áreas no cuarentenadas por garrapatas Boophilus spp.*]

Name of Accredited Veterinarian
Nombre del Médico Veterinario
Acreditado

Denise Fowler

Name of Endorsing Federal Veterinarian
Nombre del Médico Veterinario
Federal que endosa

St. V. V. V.

(b)(6)

3/10/11

Signature and Date

Firma del Médico Veterinario Acreditado y Fecha

(b)(6)

11/MAR/11

Signature of Endorsing Federal Veterinarian and Date

Firma del Médico Veterinario que endosa y Fecha

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal.*)

AFFIDAVIT
DECLARACIÓN JURADA

Page 5 of 5

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number T11-16567 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número T11-16567 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

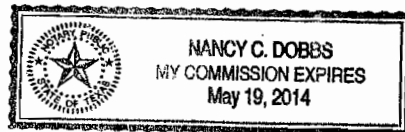
Date and signature of the exporter
Fecha y firma del exportador

(b)(6)

Feb 28, 2011

Date and signature of the Notary Public
Fecha y firma del Notario Público

Nancy C. Dobbs, Feb 28, 2011



**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

T11-16567

TIME HORSES LOADED ON CONVEYANCE 8:30 P.M. DATE 3-10-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
Brookston, Texas 75421

(b)(6)

NAME OF AUCTION/MARKET
/A

CONSIGNOR (OWNER/SHIPPER) NAME
McDaniel & Son

CONSIGNEE (RECEIVER/DESTINATION) NAME
Carnicos de Jerez, S.A. de C.V.

STREET ADDRESS
1572 CR 35020

STREET ADDRESS
Carretera Jerez Sanchez Roman KM 27.5

CITY, STATE, ZIP CODE
Brookston, Texas 75421

CITY, STATE, ZIP CODE
Jerez, Zacatecas, Mexico, C.P. 99380

AREA CODE & TELEPHONE NO.
903-784-6862

AREA CODE & TELEPHONE NO.
011 52 81 81 58 1700

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. Age	REMARKS Include existing conditions Chip #	
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld			
1	USGV	6451			X					X				X				96	981100002582355
2	USGV	6452	X							X				X				96	981100002585540
3	USGV	6453							Sr	X				X				108	981100002578645
4	USGV	6454	X							X				X				96	981100002588476
5	USGV	6455	X							X				X				72	981100002589911
6	USGV	6456							Sr	X				X				48	981100002580568
7	USGV	6457	X							X				X				84	981100002585623
8	USGV	6458		X						X				X			5 6/6 L-dip	96	981100002589000
9	USGV	6459		X						X				X				84	981100002590286
10	USGV	6460							Sr	X				X				72	981100002589898
11	USGV	6461							Bn	X				X			9/6 L-dip	72	981100002581941
12	USGV	6462							Sr	X				X				108	981100002581411
13	USGV	6463							Sr	X				X				72	981100002590405
14	USGV	6464	X							X				X				108	981100002581793
15	USGV	6465							Pt	X				X				60	981100002588254

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

SIGNATURE (b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____
DATE _____
TIME _____

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE 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).

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____
DATE _____
TIME _____

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)

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

T11-16567

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

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc. Age	REMARKS Include precondition Chip #		
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld				
16	USGV	6466			X								X					60	981100002587793	
17	USGV	6467							Pt				X				X		12	981020005294387
18	USGV	6468	x										X				X		12	981020005265607
19	USGV	6469							Rn				X				X		108	981020005281117
20	USGV	6470	x										X				X		72	981020005284226
21	USGV	6471							Sr				X				X		108	981020005285969
22	USGV	6472							Rn				X				X		96	981020005277523
23	USGV	6473							Sr				X					X	72	981020005293290
24	USGV	6474	x							x								X	84	981020005281870
25	USGV	6475							Pt				X					X	72	981020005276209
26	USGV	6476	x							x							X		108	981020005264415
27	USGV	6477	x							x								X	96	981020005294436
28	USGV	6478							Sr	x								X	60	981020005265912
29	USGV	6479							Sr		X						X		72	981020005273576
30	USGV	6480							Sr	x								X	108	981020005265570
31	USGV	6481	x								X							X	72	981020005286021
32	USGV	6482		x							X							X	60	981020005266625
33																				
34																				
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37																				
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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: (b)(6) retained in this form is true and correct to the best of my knowledge.)

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

Originating Office Phone

210-719-0000

Control Number: 8101B0303

Office Id: 978101

Mc Daniel & Son

1572 Cr 35020

Brookston

TX 75421

Service Date(s)

Begin: 11-MAR-11

End: 11-MAR-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759781177 0250	52.00	1.00	52.00

Total Due \$ 52.00

Remarks: 17-140 # T11-16567

Payment Information

Nfc Id 9999999999V

Date	Amount	Payment Type	Account/Check #
11-MAR-11	\$ 52.00	Money Order	3192193800

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.



Health Certificate No. 7117597
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
FROM THE UNITED STATES OF AMERICA TO MEXICO
CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

- Name and Address of Exporter: Beltex Corporation
3801 N Grove
Nombre y Dirección del Exportador: Fort Worth, Texas 76106
- Name and Address of Importer: Empacadora de Carnes de Fresnillo, SA de CV
Avenida Plateros #480, Zona Centro
Nombre y Dirección del Importador: Fresnillo, Zacatecas
Mexico, C.P. 99000
- Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/Sexo	Approximate age/Edad <i>aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / Sexo	Approximate age/Edad <i>aproximada</i>
033450	mare	132months	067226	mare	48months
077523	gelding	36months	067514	mare	48months
034285	mare	36months	035686	mare	96months
066971	mare	120months	067399	mare	120months
076827	mare	24months	074726	gelding	84months
032504	gelding	120months	031886	mare	24months
067063	mare	144months	031273	gelding	24months
035425	gelding	144months	035740	mare	144months

Mexico, Slaughter horse HC

3/11/11

CEB



Health Certificate No. 71117597
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
998115	gelding	72months	999675	gelding	48months
008184	mare	84months	022529	gelding	96months
987528	mare	120months	997065	mare	84months
996281	mare	24months	022827	gelding	84months
004828	gelding	36months	011150	gelding	144months
022442	gelding	144months	022911	gelding	48months
998948	mare	96months	995868	mare	84months

Total: 30hd

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

2. Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.

A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.

Inspection date / Fecha de inspección March 9, 2011

3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.

4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. 7117597
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

(Delete as appropriate / Remueva lo que no aplique)

5. [Within 5 days prior to export, the animals were dipped in coumaphos at 400 ppm. Spraying of the product is only authorized using a motor pump with coumaphos at 400 ppm.] [The animals were treated with ivermectin (NOM-019-ZOO-1994)]

[Los animales fueron tratados dentro de los 5 días previos al embarque con un baño de inmersión con coumaphos a concentración de 400 ppm. Solamente se autoriza el baño de aspersion cuando se utilice bomba de motor y se aplique una dosis de 400 ppm de coumaphos] [Los animales fueron tratados con ivermectina (NOM-019-ZOO-i994)]

Chris Larson, D.V.M.
Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

WFBIZOWN DVM
Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)

3-4-11
Signature of Accredited Veterinarian and Date
*Firma del Médico Veterinario Acreditado
y Fecha*

(b)(6)

3-11-11
Signature of Endorsing Federal Veterinarian
and Date
*Firma del Médico Veterinario que endosa
y Fecha*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) (*Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal*).

cut

AFFIDAVIT
DECLARACIÓN JURADA

I (print) ^{(b)(6)} [redacted] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 7117597 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número 7117597 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

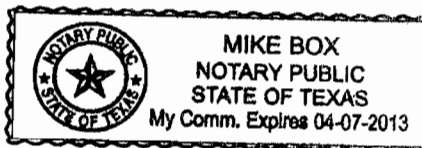
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the exporter ^{(b)(6)} [redacted] 3/9/2011
Fecha y firma del exportador

Date and signature of the Notary Public Mike Box 3/9/2011
Fecha y firma del Notario Público



R1

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

2117597

TIME HORSES LOADED ON CONVEYANCE 2:40 PM (39)	DATE 3-10-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Morton, Texas
NAME OF AUCTION/MARKET (b)(6)		
CONSIGNOR (OWNER/SHIPPER) NAME Be-Hav Feudlot	CONSIGNEE (RECEIVER/DESTINATION) NAME Bayer Cattle Co.	Pen # 23
STREET ADDRESS 2180 CR 120	STREET ADDRESS Cattle Drive	HD 29
CITY, STATE, ZIP CODE Morton, Texas	CITY, STATE, ZIP CODE Presidio, TX	
AREA CODE & TELEPHONE NO. (806) 525-4221	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			
W6V	3319	/												/	/		DR. HIG	033450
	3320	/												/	/			067226
	3321	/												/	/			077523
	3322							/						/	/			067514
	3324	/												/	/			034285
	3325								Bxw					/	/			035686
	3326	/												/	/			066971
	3327							/						/	/			067399
	3328							/						/	/			076827
	3329							/						/	/			074726
	3330							/						/	/			032504
	3331	/												/	/			031886
	3332	/												/	/			067063
	3333							/						/	/			037273
W6V	3334	/												/	/		DR. HIG	035425

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

SIGNATURE

I HEREBY CERTIFY THAT THE INFORMATION ON THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. 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 (b)(6) this form is true and correct to the best of my knowledge and belief.

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____
DATE _____
TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____
DATE _____
TIME _____

VS F... conditions are obsolete

**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 *Pen 4*
OMB NO. 0579-0160
23
TLU7597

No.	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	WJGV	3335	/											/	/			AKA HIB	035740
17		3336				/								/	/				998115
18		3337						PA						/	/				999675
19		3338						BACK						/	/				008184
20		3339						DKW						/	/				022529
21		3340						/						/	/				987528
22		3341	/											/	/				997065
23		3342						/						/	/				996281
24		3343		/										/	/				022827
25		3345						/						/	/				004828
26		3346			/									/	/				011150
27		3347						/						/	/				022492
28		3348						DKW						/	/				022911
29		3349						/						/	/				998948
30	WJGV	3360						/						/	/			AKA HIB	995868
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).

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



PRESIDIO I PORT / HORSE EXPORT

Name and Address of Remitter:

Beltex Corporation
2180 CR 120
Morton, 48 79346

Service Date

Begin: 3-10-11

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	
1	HCT1117597	\$52.00	(30hd) 1	\$52.00
2				
3				
4				
5				
Total Due				\$52.00

Payment Information

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
3/10/2011	\$52.00	On Account	751522503VA
		Check	
		CASH	
		Money Order	
		Credit Card	

480 / B6725

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

Originating Office Phone

Control Number: 4801B6725

512-383-2411

Office Id: 974801

Beltex Corporation

Service Date(s)

Po Box 427

Begin: 10-MAR-11

Whiteface

TX 79379

End: 10-MAR-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759748177 0250	52.00	1.00	52.00

Total Due \$ 52.00

Remarks: Health Certificate # T1117597

Payment Information

Nfc Id 751522503VA

Date	Amount	Payment Type	Account/Check #
23-MAR-11	\$ 52.00	Credit Acct	

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.

ceeb



Health Certificate No. 7117477
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

**INTERNATIONAL HEALTH CERTIFICATE FOR SLAUGHTER HORSES EXPORTED
 FROM THE UNITED STATES OF AMERICA TO MEXICO
 CERTIFICADO INTERNACIONAL ZOOSANITARIO PARA EXPORTAR CABALLOS PARA
 SACRIFICIO DE LOS ESTADOS UNIDOS A MEXICO**

Note: Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

Nota: México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no aceptará machos sin castrar ni monorchídeos.

1. Name and Address of Exporter: *Nombre y Dirección del Exportador:* Beltex Corporation
3801 N Grove
Fort Worth, Texas 76106
2. Name and Address of Importer: *Nombre y Dirección del Importador:* Empacadora de Carnes de Fresnillo, SA de CV
Avenida Plateros #480, Zona Centro
Fresnillo, Zacatecas
Mexico, C.P. 99000
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/Sexo	Approximate age/Edad <i>aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/Edad <i>aproximada</i>
601549	gelding	96months	601407	gelding	144months
919130	gelding	96months	935185	gelding	36months
601414	mare	36months	917953	mare	108months
980163	gelding	72months	601410	mare	24months
920056	gelding	72months	944840	gelding	96months
961769	mare	48months	974103	mare	96months
958843	gelding	84months	601554	mare	96months
601409	mare	36months	601548	mare	120months

Mexico, Slaughter horse HC

3/11/11



Health Certificate No. 7117477
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/Edad aproximada
601408	mare	36months	939051	mare	36months
980604	gelding	144months	963309	gelding	72months
601547	mare	36months	974789	mare	72months
965667	gelding	108months	601405	mare	84months
601412	gelding	36months	976161	mare	108months
973434	gelding	60months	953680	mare	84months
966502	mare	84months	962208	mare	96months

Total: 30hd

CERTIFICATION STATEMENTS / CERTIFICACIONES

- Horses originate from the United States.
Los animales son originarios de Estados Unidos.
- Within 30 days prior to exportation, the animals were inspected by an accredited veterinarian who did not find clinical signs of contagious or infectious diseases.
A la inspección efectuada por un veterinario oficial dentro de los 30 días previos a la exportación, los animales no presentaron signos de enfermedades infectocontagiosas.
 Inspection date / Fecha de inspección March 10, 2011
- Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.
Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.
- During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.
Durante los 90 días previos a la exportación, los animales no han estado en explotaciones afectadas por la metritis equina contagiosa, ni han estado en contacto con animales afectados ni relacionados epidemiológicamente con instalaciones o animales infectados.



Health Certificate No. 7117477
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(Delete as appropriate / Remueva lo que no aplique)

5. [Within 5 days prior to export, the animals were dipped in coumaphos at 400 ppm. Spraying of the product is only authorized using a motor pump with coumaphos at 400 ppm.] [The animals were treated with ivermectin (NOM-019-ZOO-1994)]

[Los animales fueron tratados dentro de los 5 días previos al embarque con un baño de inmersión con coumaphos a concentración de 400 ppm. Solamente se autoriza el baño de aspersion cuando se utilice bomba de motor y se aplique una dosis de 400 ppm de coumaphos] [Los animales fueron tratados con ivermectina (NOM-019-ZOO-i994)]

Chris Larson, D.V.M.
Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

W H BROWN DVM
Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)

3-10-11

Signature of Accredited Veterinarian and Date
*Firma del Médico Veterinario Acreditado
y Fecha*

(b)(6)

3-11-11

Signature of Endorsing Federal Veterinarian
and Date
*Firma del Médico Veterinario que endosa
y Fecha*

(Valid only if the USDA Veterinary Seal appears over the signature of the Endorsing Federal Veterinarian.) *(Válido Solamente si el sello veterinario del USDA está sobre la firma del Médico Veterinario Federal).*

centB

AFFIDAVIT
DECLARACIÓN JURADA

I (print ^{(b)(6)} [redacted] Bella Corporation declare that the horses include 7117477 accompanied by the health certificate number 7117477 have not been fed to or treated within the last one hundred eighty (180) days prior to shipment with the following compounds, plants or drugs.

Por este medio declaro que los caballos en este embarque, acompañados por el certificado sanitario número 7117477 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

1. *Aristolochia spp* and any other preparation derived of this plant, chloramphenicol, chloroform, chlorpromazine, colchicine, dapsone, dimetridazole, metronidazole, nitrofurans (including furazolidone), and ronidazole.

Aristolochia spp y cualquier otra preparación derivada de esta planta, cloranfenicol, cloroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incluyendo furazolidona) y ronidazol.

2. The following compounds were not used as growth promoters: zilpaterol, clenbuterol, raptopamine, and anabolic steroids.

Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

3. The following thirosthatics were not used: thiouracil, methyluracil phenylthiouracil and propylthiouracil.

Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

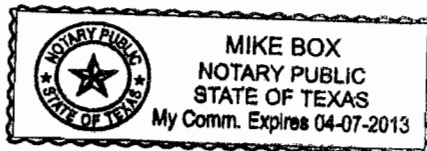
Date and signature of the exporter
Fecha y firma del exportador

^{(b)(6)} [redacted]

3/10/11

Date and signature of the Notary Public
Fecha y firma del Notario Público

Mike Box 3/10/11



**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
2117417

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

2:00 (b)(6)

30

3-11-11

Merton, Texas

Pen 24

NAME OF AUCTION/MARKET

HD 30

CONSIGNEE (OWNER/SHIPPER) NAME

CONSIGNEE (RECEIVER/DESTINATION) NAME

Belton Feedlot

Beeza Cattle

STREET ADDRESS

STREET ADDRESS

2180 CR 120

Cattle Drive

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

Merton, Texas

Presidio, Texas

AREA CODE & TELEPHONE NO.

AREA CODE & TELEPHONE NO.

(806) 525-4221

(915) 859-3942

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	NSGV 3473						/											Dark Hip	601549
2	3474						/												601407
3	3475						/												919130
4	3476						/												935185
5	3477	/					/												601414
6	3478					/	/												917953
7	3479					/	/												980163
8	3480	/					/												601410
9	3481	/					/												920056
10	3482						/												944840
11	3483						/												961769
12	3484						/												974103
13	3485					/	/												958843
14	3486						/												601554
15	NSGV 3488						/											Dark Hip	601409

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY PRIOR TO LOADING

SIGNATURE

I HEREBY AUTHORIZE THE INFORMATION CONTAINED HEREIN AND THE INFORMATION IN IT AS COMPLETED BY ME OR AN AGENT AND THE INFORMATION IN IT AS OBTAINED BY THE INSPECTOR 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)

304160

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____
DATE _____
TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____
DATE _____
TIME _____