



Health Certificate No. 711-19015  
(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.

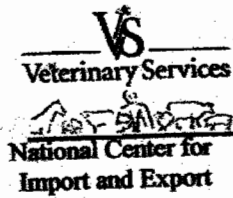
1. Name and Address of Exporter: Beltex Corporation  
Nombre y Dirección del Exportador: 3801 N Grove  
Fort Worth, Texas 76106
2. Name and Address of Importer: Empacadora de Carnes de Fresnillo, SA de CV  
Nombre y Dirección del Importador: Avenida Plateros #480, Zona Centro  
Fresnillo, Zacatecas  
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
067814	gelding	96months	033129	gelding	84months
067571	mare	96months	074277	gelding	120months
031351	gelding	24months	050694	mare	24months
071487	mare	84months	074830	gelding	144months
080476	gelding	132months	073829	mare	120months
077119	gelding	132months	049810	gelding	24months
076354	mare	24months	035689	mare	144months
067197	mare	120months	077786	gelding	144months

Mexico, Slaughter horse HC

480136275

2/22/11



Health Certificate No. 711-19015  
(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
070039	mare	96months	073978	gelding	108months
078724	gelding	144months	080420	gelding	36months
078585	gelding	36months	033895	mare	60months
063719	mare	120months	030982	mare	72months
069059	mare	120months	069071	gelding	144months
031791	mare	120months	065328	gelding	144months
073956	gelding	120months	030003	mare	144months

Total: 30hd

### CERTIFICATION STATEMENTS / CERTIFICACIONES

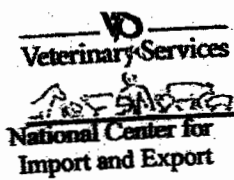
1. Horses originate from the United States.  
*Los animales son originarios de Estados Unidos.*

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 February 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.*

Mexico, Slaughter horse HC



(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.]

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

GRANT WEASE DVM  
USDA, APHIS, VETERINARY SVCS.  
EL PASO, TEXAS

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

(b) (6)

(b) (6)

2/22/11  
Signature of Accredited Veterinarian and Date  
Firma del Médico Veterinario Acreditado  
y Fecha

2/22/11  
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).

Mexico, Slaughter horse HC



AFFIDAVIT  
DECLARACIÓN JURADA

I (print (b) (6)) Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 711-19015 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 711-19015 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.

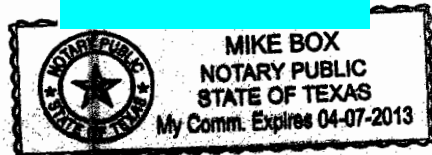
*Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.*

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

2/21/2011

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

2/21/2011





**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

711-1905

HORSES LOADED ON CONVEYANCE 3200	DATE 2-21-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Morton Texas
(b)(6)		AUCTION MARKET
OWNER/SHIPPER NAME e rex feed lot		CONSIGNEE (RECEIVER/DESTINATION) NAME T.D.A. Pens
STREET ADDRESS 120 CF 120		STREET ADDRESS 10800 Jacorro Rd
CITY, STATE, ZIP CODE Morton TX 79346		CITY, STATE, ZIP CODE El Paso, TX
PHONE & TELEPHONE NO. 001525-4221		AREA CODE & TELEPHONE NO.

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	1835					✓						✓			✓	Art hsp	067814
2	1836					✓						✓			✓		033129
3	1837					✓						✓	✓				067571
4	1838					✓						✓			✓		074277
5	1839					✓						✓			✓		031351
6	1840						App					✓	✓				050694
7	1841					✓						✓	✓				071487
8	1842						Pal					✓			✓		074830
9	1843	✓										✓			✓		080476
10	1844					✓						✓	✓				073829
11	1845					✓						✓			✓		077119
12	1847					✓						✓			✓		049810
13	1848					✓						✓	✓				076354
14	1850		✓									✓	✓			Art hsp	035689
15	1851					✓						✓	✓				067197

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



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

711-19015

**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			
156	1952						APP					✓			✓	Art hip	077 786	
17	1853			✓								✓	✓				070 039	
18	1854						APP					✓			✓		073 978	
19	1855		✓									✓			✓		078 724	
20	1856					✓						✓			✓		080 420	
21	1857					✓						✓			✓		078 585	
22	1858	✓										✓	✓				033 895	
23	1859	✓										✓	✓				063 719	
24	1860						✓					✓	✓				030 982	
25	1861						✓					✓			✓		069 059	
26	1862						✓					✓					069 071	
27	1864	✓										✓	✓				031 791	
28	1865	✓										✓			✓		065 328	
29	1866	✓										✓			✓		073 956	
30	1867						✓					✓	✓			Art hip	030 003	
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).

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. 711-19016  
(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.

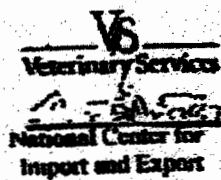
**Nota:** México aceptará este envío de caballos solamente si la forma VS FORM 10-13 y la declaración jurada están completadas y se presentan en la frontera con este Certificado Zoosanitario (CZ). El número de este CZ debe estar escrito en la parte superior derecha de la forma VS FORM 10-13. México no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

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
031878	gelding	84months	074851	mare	84months
030962	mare	48months	078649	mare	36months
029805	gelding	84months	062864	mare	72months
033198	mare	120months	066605	mare	84months
080193	gelding	48months	068429	gelding	36months
030304	gelding	144months	245062	mare	48months
605556	gelding	144months	097503	gelding	24months
970847	gelding	24months	603325	gelding	36months

Mexico, Slaughter horse HC

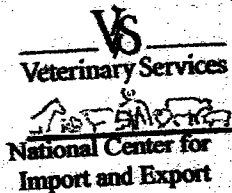




Health Certificate No. 711-17016  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
935941	gelding	36months	035664	gelding	96months
980170	mare	144months	966965	mare	120months
274428	mare	72months	946868	mare	120months
602020	mare	120months	604470	mare	144months
602134	gelding	120months	097437	gelding	132months
977981	gelding	144months	601400	mare	144months
602423	mare	120months	967899	mare	132months
603964	mare	120months	962057	gelding	144months
602988	mare	84months	602919	mare	96months
602270	mare	96months			
Total:35hd					

Mexico, Slaughter house HC



Health Certificate No. 711-19016  
(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**

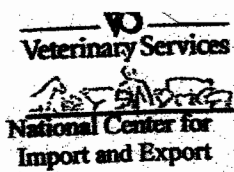
1. Horses originate from the United States.  
*Los animales son originarios de Estados Unidos.*

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 February 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.*

Mexico, Slaughter horse HC



(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

(Delete as appropriate / Remueva lo que no aplique)

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

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

GRANT WEASE DVM  
USDA, APHIS, VETERINARY SVCS.  
EL PASO, TEXAS

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

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

(b)(6)

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

(b)(6)

[Redacted Signature]  
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).

Mexico, Slaughter horse HC



AFFIDAVIT  
DECLARACIÓN JURADA

I (print (b)(6)) Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 711-19016 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 711-19016 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 thirosthaties 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*

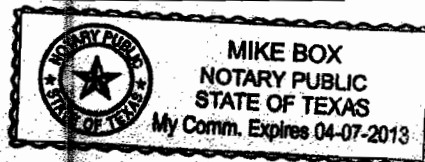
(b)(6)

2/21/2011

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

(b)(6)

2/21/2011





**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

7/1-17016.

DATE HORSES LOADED ON CONVEYANCE

2:30 A.M.

DATE

2-22-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Morton, Texas

NAME OF AUCTION MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

T.D.A. Pena

STREET ADDRESS

10800 Socorro Rd

CITY, STATE, ZIP CODE

El Paso, TX

AREA CODE & TELEPHONE NO.

Hex Feedlot

80 CR 120

CITY, STATE, ZIP CODE

Morton, TX

AREA CODE & TELEPHONE NO.

(505) 525-4221

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	Stall	Geld		
SEN	1930					/						/				ART HIP	031878
	1971	/										/	/				074851
	1932	/										/	/				030902
	1933						DUN					/	/				078049
	1934	/										/	/				029805
	1935	/										/	/				0028104
	1936	/				/						/	/				033198
	1937						BRN					/	/				006605
	1938	/										/	/				080193
	1939	/				/						/	/				068429
	1940	/				/						/	/				030304
	1941	/				/	PAL					/	/				245002
	1942	/				/						/	/				605556
	1943	/				/						/	/				097503
SEN	1944	/				/						/	/			ART HIP	0970847

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

(b)(6)

SIGNATURE

I HEREBY AUTHORIZE THE 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 \_\_\_\_\_

Previous editions are obsolete

PART 1 - INSPECTOR

PAGE 1 OF 2



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

711-1704

TAG NO.	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	1945					/											ART	1003335
17	1946					/												935944
18	1947						BAN											0351664
19	1948						DUN											0981710
20	1949																	91609105
21	1950						PAL											274428
22	1951						DUN											9468108
23	1952	/																1002000
24	1953	/																1004470
25	1954						ROD											1002134
26	1955						PAL											092437
27	1956						DUN											977481
28	1957																	1001400
29	1958						APD											1002423
30	1959	/																9107879
31	1960																	1003916
32	1961																	916265
33	1962	/																1000988
34	1963						ROD											1002919
35	1964	/															ART Hip	1002270

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.)

1304193





Health Certificate No. 711-19017  
 (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**

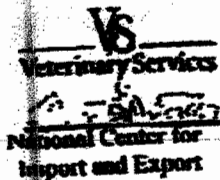
**Note:** Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

**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
601993	mare	24months	097944	mare	36months
940170	mare	48months	097994	mare	84months
098011	gelding	120months	243557	mare	84months
604592	mare	72months	267167	mare	144months
857128	mare	24months	919945	mare	144months
963672	gelding	48months	939788	mare	108months
964636	gelding	144months	603522	mare	36months
941373	gelding	36months	605116	mare	120months

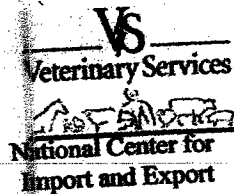
Mexico, Slaughter horse HC



Health Certificate No. 711-19017  
 (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
098335	gelding	96months	098296	gelding	120months
348442	gelding	72months	097053	gelding	84months
098042	gelding	36months	953109	gelding	144months
310949	mare	144months	953297	gelding	96months
951927	mare	72months	097813	gelding	72months
604032	gelding	144months	977422	gelding	60months
261821	mare	96months	601923	mare	72months
968681	mare	36months	602560	mare	120months
Total: 32hd					

Mexico, Slaughter horse HC



Health Certificate No. 711-19017  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

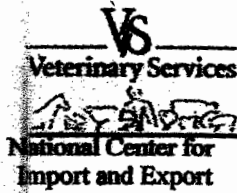
Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada

**CERTIFICATION STATEMENTS / CERTIFICACIONES**

- 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 February 21, 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.*

Mexico, Slaughter horse HC





Health Certificate No. 711-19017 Page 4  
(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 pp ticks.]

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

GRANT WEASE DVM  
USDA, APHIS, VETERINARY SVCS.  
EL PASO, TEXAS

Chris Larson, D.V.M.

Name of Accredited Veterinarian  
Nombre del Médico Veterinario  
Acreditado

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

(b)(6)

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

(b)(6)

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).

Mexico, Slaughter horse HC

**AFFIDAVIT  
DECLARACIÓN JURADA**

I (print (b)(6) Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 711-19017 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 711-19017 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 thirosthaties 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*

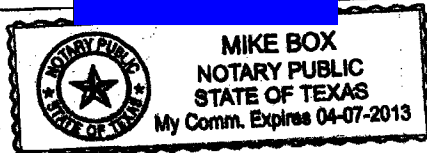
(b)(6)

2/21/2011

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

(b)(6)

2/21/2011





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

**R5**  
**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

7/11/90

TIME HORSES LOADED ON CONVEYANCE

2:30

DATE

2/22/11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Morton Texas

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Belta Feedlot

STREET ADDRESS

2180 C.R. 120

CITY, STATE, ZIP CODE

Morton, TX

AREA CODE & TELEPHONE NO.

(806) 525-4221

CONSIGNEE (RECEIVER/DESTINATION) NAME

J.D.A. Pena

STREET ADDRESS

10800 Socorro Rd

CITY, STATE, ZIP CODE

Ed Paso, TX

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 under load.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USGV 1965	✓										✓	✓				601983
2	1966					✓						✓	✓				097984
3	1967	✓										✓	✓				940180
4	1968						APP					✓	✓				097984
5	1969						APP					✓		✓			098081
6	1970		✓									✓	✓				243587
7	1971						Pal					✓	✓				604582
8	1972					✓						✓	✓				267187
9	1973						Pal					✓	✓				857188
10	1974				✓							✓	✓				919985
11	1975	✓										✓		✓			963682
12	1976						Dun					✓	✓				939888
13	1977	✓										✓		✓			964686
14	1978						Red					✓	✓				603888
15	USGV 1979						APP					✓		✓			941388

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

SIGNATURE

I HEREBY AU

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.)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION  
FRONTERAS (DGIF)

EST.

DATE

TIME



R5

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

711-19057

CONTAINER NO.		(Please type or print in Ink)										collection of information					SEX				BRANDS	REMARKS
TAG		Tag	COLOR DESCRIPTION							BREED/TYPE					SEX				Tattoos, etc.	Include		
PREFIX		NO.	Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld						
16	USEV	1980					/						/	/				ART Hip	005116			
17		1981				/							/						098335			
18		1982						DUP					/						098296			
19		1983						BLK					/						348442			
20		1984						PAL					/						097053			
21		1985	/										/						098022			
22		1986						DUP					/						953129			
23		1987						PAL					/						310959			
24		1988	/										/						953127			
25		1989						APP					/						097213			
26		1990					/						/						004103			
27		1991					/						/						977122			
28		1992					/						/	/					260128			
29		1993	/										/	/					001923			
30		1994					/						/	/					910863			
31		1995				/							/	/				ART Hip	002520			
32	USEV	1996					/							/	/							
33																						
34																						
35																						
36																						
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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)





Health Certificate No. 711-19018  
(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
097543	mare	72months	601428	mare	60months
097552	mare	96months	097640	mare	60months
097641	gelding	144months	097637	mare	48months
601553	mare	84months	097585	mare	96months
097639	mare	144months	097551	mare	144months
097550	mare	36months	601433	gelding	96months
032322	mare	84months	068721	mare	96months
068151	gelding	36months	051054	gelding	36months

Mexico, Slaughter horse HC



Health Certificate No. 711-19018  
(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
080131	mare	108months	030274	mare	36months
031501	mare	120months	077038	mare	84months
080521	mare	60months	048749	mare	120months
080412	gelding	108months	031406	mare	96months
077704	gelding	132months	035036	mare	72months
063160	gelding	120months	032902	gelding	120months
030007	gelding	84months	078956	gelding	120months

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 February 21, 2011

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

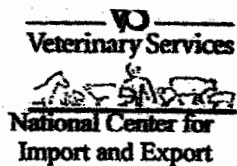
*Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.*

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.*

Mexico, Slaughter horse HC





(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

Delete as appropriate / Remueva lo que no aplique)

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

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

Chris Larson, D.V.M.

Name of Accredited Veterinarian  
Nombre del Médico Veterinario  
Acreditado

GRANT WEASE DVM  
USDA, APHIS, VETERINARY SVCS.  
EL PASO, TEXAS

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

(b)(6)

(b)(6)

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).

Mexico, Slaughter horse HC

**AFFIDAVIT  
DECLARACIÓN JURADA**

I (print <sup>(b)(6)</sup> [redacted]) Be Hex Corp declare that the horses included in this shipment and accompanied by the health certificate number 711-19018 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 711-19018 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*

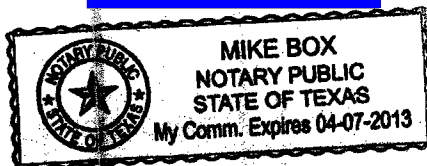
<sup>(b)(6)</sup> [redacted]

2/21/2011

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

<sup>(b)(6)</sup> [redacted]

2/21/2011







**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

T11-19018

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		
US6V	1914					✓						✓			✓	Art hip	051 054
	1915	✓										✓	✓				080 131
	1916					✓						✓	✓				030 274
	1917	✓										✓	✓				031 501
	1918	✓										✓	✓				077 038
	1919			✓								✓	✓				080 521
	1920						Dun					✓	✓				048 749
	1921	✓										✓		✓			080 412
	1922					✓						✓	✓				031 406
	1923		✓									✓		✓			077 704
	1924					✓						✓	✓				035 036
	1925	✓										✓		✓			063 160
	1926					✓						✓		✓			032 902
	1927					✓						✓		✓			030 007
US6V	1928					✓						✓		✓	Art hip	078 956	

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.)





Health Certificate No. 711-19019  
(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**

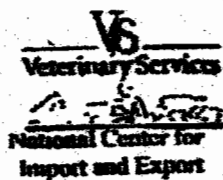
**Note:** Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

**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 monorchideos.

1. Name and Address of Exporter: Beltex Corporation  
3801 N Grove  
Nombre y Dirección del Exportador: Fort Worth, Texas 76106
2. 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
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
066545	mare	84months	030283	gelding	144months
068776	mare	60months	071693	mare	24months
076061	mare	144months	032831	gelding	120months
601426	mare	72months	601551	mare	72months
097548	mare	72months	601430	mare	108months
601432	gelding	120months	097546	mare	60months
601429	mare	72months	097636	mare	48months
097544	mare	24months	601427	gelding	120months

Mexico, Slaughter horse HC

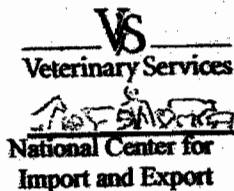


Health Certificate No. 711-79019  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

Microchip number / Número de microchip	Sexo/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
601434	mare	120months	097642	gelding	24months
242667	mare	72months	097549	mare	144months
097635	mare	84months	097633	mare	96months
601431	mare	96months	097583	gelding	24months
097638	mare	36months	097634	mare	84months
601425	gelding	108months	097586	mare	72months
097547	mare	48months	097545	gelding	36months
601550	mare	36months			
Total: 31hd					

Mexico, Slaughter horse HC





Health Certificate No. 711-19019  
(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**

- 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 February 21, 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.*

Mexico, Slaughter horse HC



Veterinary Services  
National Center for  
Import and Export

(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

Delete as appropriate / Remueva lo que no aplique)

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

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

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

GRANT WEASE DVM  
USDA, APHIS, VETERINARY SVCS.  
EL PASO, TEXAS  
Name of Endorsing Federal Veterinarian  
Nombre del Médico Veterinario  
Federal que endosa.

(b)(6)

(b)(6)

2-22-11  
Veterinarian and Date  
Firma del Médico Veterinario Acreditado  
y Fecha

2/22/11  
rian  
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).

Mexico, Slaughter horse HC



AFFIDAVIT  
DECLARACIÓN JURADA

I (principal) (b)(6) Beltex Corp declare that the horses included (b)(6) accompanied by the health certificate number 711-19019 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 711-19019 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)

2/21/2011

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

(b)(6)

2/21/2011



OWNER/SHIPPER CERTIFICATE

HORSES 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

711-19019

HORSES LOADED ON CONVEYANCE 2:30 PM	DATE 2-21-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Morton Texas
(b)(6)		NAME OF AUCTION/MARKET
Trex Feedlot		CONSIGNEE (RECEIVER/DESTINATION) NAME T.O.A. Pears
STREET ADDRESS Box 120		STREET ADDRESS 10800 Socorro Rd
CITY, STATE, ZIP CODE Morton TX 79346		CITY, STATE, ZIP CODE El Paso TX
TELEPHONE NO. 505-9221		AREA CODE & TELEPHONE NO.

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		
	1868			✓								✓	✓			Art hsp	066 545
	1869					✓						✓			✓		030 283
	1870				✓							✓	✓				068 776
	1871					✓						✓	✓				071 693
	1872					✓						✓	✓				076 061
	1873						Pal					✓			✓		032 831
	1874						APP					✓	✓				601 426
	1875			✓								✓	✓				601 551
	1876					✓						✓	✓				097 548
	1877					✓						✓	✓				601 430
	1878					✓						✓			✓		601 432
	1879	✓										✓	✓				097 546
	1880		✓									✓	✓				601 429
	1881				✓							✓	✓				097 636
	1882					✓						✓	✓			Art hsp	097 544

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

(b)(6)  
I AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS  
REQUIRED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY  
FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN  
\$50,000 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 \_\_\_\_\_

Previous editions are obsolete



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

771-19019

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		
SBV	1883	✓										✓			✓	Art hip	601 427
	1884						A/b					✓	✓				601 434
	1885					✓						✓			✓		097 642
	1886	✓										✓	✓				242 667
	1887					✓						✓	✓				097 549
	1888						A/b					✓	✓				097 635
	1889	✓										✓	✓				097 633
	1890					✓						✓	✓				601 431
	1891	✓										✓			✓		097 583
	1892						A/b					✓	✓				097 638
	1893						A/D					✓	✓				097 634
	1894		✓									✓			✓		601 425
	1895					✓						✓	✓				097 586
	1896					✓						✓	✓				097 547
	1897					✓						✓			✓		097 545
SBV	1898					✓						✓	✓			Art hip	601 550

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

512-383-2411

Beltex Corporation

Po Box 427

Whiteface TX 79379

Control Number: 4801B6275

Office Id: 974801

Service Date(s)

Begin: 22-FEB-11

End: 22-FEB-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
01	Slaughter Animals To Can Or Mx	1759748177 0250	52.00	5.00	260.00

Total Due \$ 260.00

Remarks: Health Certificate # T1119015, 9016, 9017, 9018, 9019

Payment Information

Nfc Id  
751522503VA

Date	Amount	Payment Type	Account/Check #
11-MAR-11	\$ 260.00	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.



U.S. DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICEOWNERSHIP CERTIFICATE  
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY  
(CONTINUATION SHEET)

(Please type or print in ink)

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

FORM  
APPROVED  
OMB NO.  
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Gray	Blk	Pinto	Chest	Other	TB	QT	Draft	Pony	Other	Mare	Stall	Gold		
15	462 71															✓ 120H	985 170 001 039 308
17	72					✓							✓			✓ 10H	985 170 001 028 006
18	73		✓										✓			✓ 10H	985 170 001 028 379
19	74						✓									✓ 10H	985 170 001 015 109
20	75		✓													✓ 10H	985 170 001 012 482
21	76						✓						✓			✓ 120H	985 170 001 009 803
22	77						✓						✓			✓ 120H	985 170 001 012 332
23	78					✓										✓ 120H	985 170 001 014 450
24	79						✓									✓ 120H	985 170 001 027 668
25	80	✓											✓			✓ 120H	985 170 000 983 355
26	81				✓											✓ 120H	985 170 000 984 652
27	82		✓										✓			✓ 10H	985 170 001 015 498
28	83					✓										✓ 10H	985 170 001 011 511
29	84	✓														✓ 10H	985 170 000 984 786
30	85					✓							✓			✓ 10H	985 170 000 984 641
31	86			✓												✓ 10H	985 170 001 006 913
32	87				✓								✓			✓ 120H	985 170 001 038 529
33	88					✓										✓ 120H	985 170 001 018 475
34	89	✓											✓			✓ 10H	985 170 001 037 033
35	462 90		✓										✓			✓ 10H	985 170 001 022 484
36																	
37																	
38																	
39																	
40																	
41																	
42																	
43																	
44																	
45																	

I HEREBY AUTHORIZE THE CIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CIA 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)

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



Health Certificate No. **T11-18340**  
(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:*

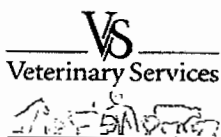
**Carnicos de Jerez, S.A. de C.V.  
Carratera Jerez Sanchez Roman KM 27.5  
Jerez, Zacatecas, Mexico C.P. 99380**

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
USGZ 0121 985170001002201	NEUTER	108 MONTHS	USGZ 0129 985170001025349	NEUTER	60 MONTHS
0122 985170001007257	NEUTER	108 MONTHS	0130 985170000987430	FEMALE	72 MONTHS
0123 985170001006175	FEMALE	60 MONTHS	0131 985170001009133	FEMALE	72 MONTHS
0124 985170000985384	FEMALE	60 MONTHS	0132 985170001026190	FEMALE	60 MONTHS
0125 985170001008673	NEUTER	48 MONTHS	0133 985170000983337	FEMALE	72 MONTHS
0126 985170001008051	FEMALE	108 MONTHS	0134 985170001036710	NEUTER	108 MONTHS
0127 985170001007234	NEUTER	120 MONTHS	0135 985170001026826	FEMALE	48 MONTHS
0128 985170001011567	NEUTER	108 MONTHS	0136 985170001028186	FEMALE	60 MONTHS

Mexico, Slaughter horse HC





Health Certificate No. T11-18340  
(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
USGZ 0137 985170000983862	FEMALE	60 MONTHS	USGZ 0144 985170001037644	NEUTER	84 MONTHS
0138 985170000983028	FEMALE	48 MONTHS	0145 985170000985927	FEMALE	60 MONTHS
0139 985170001010084	FEMALE	72 MONTHS	0146 985170001006883	NEUTER	84 MONTHS
0140 985170001040020	NEUTER	72 MONTHS	0147 985170001006623	FEMALE	48 MONTHS
0141 985170001007275	FEMALE	108 MONTHS	0148 985170000995987	NEUTER	60 MONTHS
0142 985170000996760	FEMALE	108 MONTHS	0149 985170001006868	FEMALE	60 MONTHS
0143 985170001039384	FEMALE	60 MONTHS	0150 985170001040016	NEUTER	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 5/2/11

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. T11-18340  
(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* 5/3/11

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* 5/3/11

(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

<b>U.S. DEPARTMENT OF AGRICULTURE</b> <b>ANIMAL AND PLANT HEALTH INSPECTION SERVICE</b>		<b>OWNERSHIP CERTIFICATE</b> <b>FITNESS TO TRAVEL TO A SLAUGHTER FACILITY</b> (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	
NAME OF HORSES LOADED ON CONVEYANCE 1200 P.M.		DATE 5-02-11	
CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Eagle Pass TX		NAME OF AUCTION/MARKET N/A	
CONSIGNEE (RECEIVER/DESTINATION) NAME B+B Trading Co		STREET ADDRESS Carrión de Jerez S.A. de C.V.	
CITY, STATE, ZIP CODE Eagle Pass TX 78842		CITY, STATE, ZIP CODE Carrión de Jerez San Luis Potosí 78842	
AREA CODE & TELEPHONE NO. 130 757-6404		AREA CODE & TELEPHONE NO. 44 46-40-46	

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	Gray	Blk	Pinto	Chest	Other	TS	OT	Dalb	Pony	Other	Mare	Stal	Gold			
1158Z	21						✓		✓						✓	10/14	985 170 001 002 201	
	22						✓		✓						✓	10/14	985 170 001 007 257	
	23					✓			✓				✓		✓	10/14	985 170 001 006 175	
	24			✓					✓				✓		✓	10/14	985 170 000 985 384	
	25				✓				✓						✓	10/14	985 170 001 008 673	
	26			✓					✓				✓		✓	10/14	985 170 001 008 051	
	27	✓							✓						✓	10/14	985 170 001 007 234	
	28						✓		✓						✓	10/14	985 170 001 011 567	
	29						✓		✓				✓		✓	10/14	985 170 001 025 349	
	30					✓			✓				✓		✓	10/14	985 170 000 987 430	
	31	✓							✓				✓		✓	10/14	985 170 001 009 133	
	32			✓					✓				✓		✓	10/14	985 170 001 026 190	
	33					✓			✓				✓		✓	10/14	985 170 000 983 337	
	34						✓		✓				✓		✓	10/14	985 170 001 036 710	
1158Z	35	✓							✓				✓		✓	10/14	985 170 001 026 826	

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

(b)(6)

HEREBY CERTIFY THAT THE INFORMATION ON THIS DOCUMENT AND THE INFORMATION BY IT AS A 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

## CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

## DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.

DATE

TIME

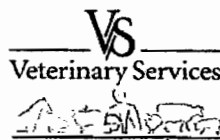


FORM  
APPROVED  
OMB NO.  
0579-0160

**Offering: none or order in field**

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk	Pinto	Chalk	Other	TB	QT	Dark	Pony	Other	Mare	Stall	Gold		
52	36			✓					✓				✓			60/4	985 170 001 028 186
	37			✓					✓				✓			60/4	985 170 000 983 862
	38			✓					✓				✓			4/4	985 170 000 983 028
	39				✓				✓				✓			7/4	985 170 001 010 084
	40	✓							✓							7/4	985 170 001 040 020
	41					✓			✓				✓			60/4	985 170 001 007 275
	42	✓							✓				✓			60/4	985 170 000 996 760
	43	✓							✓				✓			60/4	985 170 001 039 384
	44					✓			✓							7/4	985 170 001 037 644
	45	✓							✓				✓			60/4	985 170 000 985 927
	46					✓			✓							7/4	985 170 001 006 883
	47				✓				✓				✓			4/4	985 170 001 006 623
	48		✓						✓							60/4	985 170 000 995 987
	49							✓	✓				✓			60/4	985 170 001 006 868
	50							✓	✓							7/4	985 170 001 040 016
	51	✓							✓							7/4	985 170 001 038 546
	52			✓					✓				✓			9/4	985 170 000 983 267
	53				✓				✓				✓			9/4	985 170 001 023 979
	54			✓					✓				✓			7/4	985 170 001 010 614
52	55				✓				✓				✓			4/4	985 170 001 011 691

(b)(6) [REDACTED] that the information contained in this form is true and correct to the best of my knowledge.)



Health Certificate No. T11-18341  
(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
USGZ 0191 985170001028846	FEMALE	120 MONTHS	USGZ 0199 985170001026481	FEMALE	84 MONTHS
0192 985170000982605	FEMALE	120 MONTHS	0200 985170001012487	FEMALE	84 MONTHS
0193 985170001028525	NEUTER	132 MONTHS	0201 985170001012275	FEMALE	84 MONTHS
0194 985170001029063	FEMALE	96 MONTHS	0202 985170001008486	FEMALE	96 MONTHS
0195 985170001027760	FEMALE	96 MONTHS	0203 985170001010700	FEMALE	108 MONTHS
0196 985170001006478	NEUTER	108 MONTHS	0204 985170001013025	NEUTER	132 MONTHS
0197 985170000983584	FEMALE	96 MONTHS	0205 985170001016383	FEMALE	108 MONTHS
0198 985170001014584	FEMALE	96 MONTHS	0206 985170001029402	FEMALE	96 MONTHS

Mexico, Slaughter horse HC





Health Certificate No. T11-18341  
(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
USGZ 0207 985170001000692	NEUTER	108 MONTHS	USGZ 0214 985170001028523	NEUTER	120 MONTHS
0208 985170001000828	FEMALE	96 MONTHS	0215 985170000985485	NEUTER	120 MONTHS
0209 985170000996437	FEMALE	96 MONTHS	0216 985170001028743	FEMALE	108 MONTHS
0210 985170000983372	FEMALE	96 MONTHS	0217 985170001027619	FEMALE	108 MONTHS
0211 985170001012391	FEMALE	72 MONTHS	0218 985170001015346	FEMALE	132 MONTHS
0212 985170001026208	FEMALE	96 MONTHS	0219 985170001015147	NEUTER	108 MONTHS
0213 985170000983320	NEUTER	108 MONTHS	0220 985170001010967	NEUTER	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 5/2/11

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.*

[illegible]

**Mexico Slaughter Horses Health Certificate**  
April 2, 2009





Health Certificate No. T11-18341  
(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 5/4/11*

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 5/4/11*

(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)																																																																	
HORSES LOADED ON CONVEYANCE					DATE					CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE																																																							
9:00 AM					504-11					Cagle Texas TX																																																							
(b)(6)										NAME OF AUCTION/MARKET																																																							
(b)(6)										N/A																																																							
313 TRADING CO										CONSIGNEE (RECEIVER/DESTINATION) NAME																																																							
STREET ADDRESS										CARNILOS DE JEREZ S.A. DE C.V.																																																							
996 VISTA HERCOSA										STREET ADDRESS																																																							
CITY, STATE, ZIP CODE										CARRETERA JEREZ SAN LUIS ROHAN Km 27.5																																																							
EAGLE PASS TX 78852										CITY, STATE, ZIP CODE																																																							
AREA CODE & TELEPHONE NO.										JEREZ ZARATECAS MEXICO CP 99380																																																							
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																																																																	
<input checked="" type="checkbox"/> Pregnant mares are not likely to foal (give birth) during the trip.																						<input type="checkbox"/> Horses are able to bear weight on all 4 limbs.																						<input checked="" type="checkbox"/> Horses are able to walk unassisted.																					
<input checked="" type="checkbox"/> Foals are older than 6 months of age.																						<input type="checkbox"/> Horses are not blind in both eyes.																																											
TAG		Tag		COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS		REMARKS Include																																													
PREPCK	NO.	Bay	Gray	BK	Pinto	Chest	Other	TB	QT	Oral	Pony	Other	Mare	Stall	Gold	Tattoos, etc.	existing conditions																																																
US62	0191					/			/				/		12/11		985 170 001 028 846																																																
	92				/				/				/		12/11		985 170 000 982 605																																																
	93						/		/						7/20/11		985 170 001 028 525																																																
	94					/			/				/		9/6/11		985 170 001 029 063																																																
	95					/			/				/		9/6/11		985 170 001 027 760																																																
	96					/			/						7/6/11		985 170 001 006 478																																																
	97					/			/				/		9/6/11		985 170 000 983 584																																																
	98				/				/				/		9/6/11		985 170 001 014 584																																																
	99			/					/				/		10/11		985 170 001 026 481																																																
	0200				/				/				/		8/11		985 170 001 012 487																																																
	0201				/				/				/		11/11		985 170 001 012 275																																																
	02						/		/				/		9/6/11		985 170 001 008 486																																																
	03				/				/				/		10/11		985 170 001 010 700																																																
	04				/				/				/		10/11		985 170 001 013 025																																																
US62	05	/							/				/		10/11		985 170 001 016 383																																																
HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS										CANADIAN FOOD INSPECTION AGENCY (CFIA)																																																							
(b)(6)										EST.																																																							
(b)(6)										DATE																																																							
(b)(6)										TIME																																																							
(b)(6)										DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)																																																							
(b)(6)										EST.																																																							
(b)(6)										DATE																																																							
(b)(6)										TIME																																																							

Previous editions are obsolete

PAGE 1 OF 1

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	Stall	Geld		
USEZ	06			/					/				/			964	985 170 001 029 402
	07				/				/							704	985 170 001 000 692
	08					/			/				/			964	985 170 001 000 828
	09	/							/				/			964	985 170 000 996 437
	10					/			/				/			964	985 170 000 983 372
	11					/			/				/			124	985 170 001 012 391
	12					/			/				/			964	985 170 001 026 208
	13					/			/				/			104	985 170 000 983 320
	14				/				/							1204	985 170 001 028 523
	15					/			/				/			1204	985 170 000 985 485
	16					/			/				/			104	985 170 001 028 743
	17					/			/				/			104	985 170 001 027 619
	18					/			/				/			1344	985 170 001 015 346
	19						/		/							104	985 170 001 015 147
	20						/		/							104	985 170 001 010 967
	21					/			/				/			104	985 170 001 023 342
	22					/			/							104	985 170 001 026 632
	23			/					/							104	985 170 001 007 988
	24				/				/				/			104	985 170 001 007 873
USEZ	25	/							/							104	985 170 001 008 080

HEREBY AUTHORIZE THE CIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CIA 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)

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





Health Certificate No. T11-18342  
(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
USGZ 0001 985170000984525	NEUTER	96 MONTHS	USGZ 0009 985170001009582	FEMALE	96 MONTHS
0002 985170001005723	NEUTER	96 MONTHS	0010 985170001023814	FEMALE	96 MONTHS
0003 985170000982524	NEUTER	108 MONTHS	0011 985170001002189	FEMALE	108 MONTHS
0004 985170001039164	NEUTER	72 MONTHS	0012 985170001027315	FEMALE	108 MONTHS
0005 985170001005556	FEMALE	108 MONTHS	0013 985170001010265	FEMALE	120 MONTHS
0006 985170001038551	NEUTER	96 MONTHS	0014 985170001006098	NEUTER	120 MONTHS
0007 985170000983469	NEUTER	96 MONTHS	0015 985170000986109	NEUTER	96 MONTHS
0008 985170000983104	NEUTER	84 MONTHS	0016 985170001009046	FEMALE	75 MONTHS

Mexico, Slaughter horse HC



Health Certificate No. T11-18342  
(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
USGZ 0017 985170001027950	NEUTER	60 MONTHS	USGZ 0024 985170000984085	FEMALE	108 MONTHS
0018 985170000983833	FEMALE	60 MONTHS	0025 985170001000705	FEMALE	108 MONTHS
0019 985170000982858	FEMALE	72 MONTHS	0026 985170001014103	FEMALE	72 MONTHS
0020 985170000984312	FEMALE	72 MONTHS	0027 985170001011779	FEMALE	84 MONTHS
0021 985170001026147	FEMALE	88 MONTHS	0028 985170001012077	FEMALE	96 MONTHS
0022 985170000985006	FEMALE	88 MONTHS	0029 985170000986909	NEUTER	96 MONTHS
0023 985170001026669	NEUTER	72 MONTHS	0030 985170001009142	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 5/2/11
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. T11-18342  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

[illegible]

Mexico Slaughter Horses Health Certificate  
April 2, 2009





Health Certificate No. T11-18342  
(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 5/4/11*

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 5/4/11*

(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

<b>U.S. DEPARTMENT OF AGRICULTURE</b> <b>ANIMAL AND PLANT HEALTH INSPECTION SERVICE</b>		<b>OWNERSHIP CERTIFICATE</b> <b>FITNESS TO TRAVEL TO A SLAUGHTER FACILITY</b> (Please type or print in ink)	
According to the Paperwork Reduction Act of 1985, 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	
NUMBER OF HORSES LOADED ON CONVEYANCE 400 B4		DATE 5/20/11	
CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Eagle Pass TX		NAME OF AUCTION/MARKET 7/11	
INSIGNOR (OWNER/SHIPPER) NAME 3+B TRADING CO		CONSIGNEE (RECEIVER/DESTINATION) NAME CARINOS DE JEREZ S.A. DE C.V.	
STREET ADDRESS 996 VISTA HERMOZA		STREET ADDRESS CARRETERA JEREZ-SAN LUIS 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. ☒ 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	Gray	Blk.	Pinto	Chestn.	Other	TB	OT	Draft	Pony	Other	Mare	Stall	Geld		
US62	0001	✓							✓						✓	964 985 170 000 984 525	
	02				✓				✓						✓	964 985 170 001 005 723	
	03			✓					✓						✓	1084 985 170 000 982 524	
	04	✓							✓						✓	1204 985 170 001 039 164	
	05		✓						✓				✓		✓	1084 985170001005556	
	06					✓			✓						✓	964 985 170 001 038 551	
	07				✓				✓						✓	964 985 170 000 983 469	
	08					✓			✓						✓	894 985 170 000 983 104	
	09	✓							✓				✓		✓	964 985 170 001 009 582	
	10						✓		✓				✓		✓	964 985 170 001 023 814	
	11				✓				✓				✓		✓	1084 985 170 001 002 189	
	12			✓					✓				✓		✓	1084 985 170 001 027 315	
	13				✓				✓				✓		✓	1204 985 170 001 010 265	
	14	✓							✓						✓	1204 985 170 001 006 098	
US62	15	✓							✓						✓	964 985 170 000 986 109	

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IN THE LAST 24 HOURS.

SIGNATURE \_\_\_\_\_

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).

I, \_\_\_\_\_, certify that the 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 0579-0100. 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.  
0579-0100

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoo, etc.	REMARKS Include precondition
			Bay	Gray	Blk	Pinto	Chest	Other	TB	QT	Dark	Pony	Other	Mare	Stall	Gold		
16	1562	0016						✓		✓				✓			154	985 170 001 009 046
17		17	✓							✓						✓	604	985 170 001 027 950
18		18	✓							✓				✓			604	985 170 000 983 833
19		19						✓		✓				✓			124	985 170 000 982 858
20		20					✓			✓				✓			124	985 170 000 984 312
21		21					✓			✓				✓			694	985 170 001 026 147
22		22					✓			✓				✓			984	985 170 000 985 006
23		23	✓							✓						✓	124	985 170 001 026 669
24		24	✓							✓				✓			1054	985 170 000 984 085
25		25		✓						✓				✓			1004	985 170 001 000 705
26		26					✓			✓				✓			124	985 170 001 014 103
27		27	✓							✓				✓			874	985 170 001 011 779
28		28	✓							✓				✓			964	985 170 001 012 077
29		29					✓			✓						✓	964	985 170 000 986 909
30		30	✓							✓				✓			964	985 170 001 009 142
31		31	✓							✓						✓	1084	985 170 001 037 141
32	1562	32					✓			✓				✓			124	985 170 000 982 578
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I HEREBY AUTHORIZE THE CIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CIA 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. T11-18343  
(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
USGZ 0261 985170001010677	FEMALE	84 MONTHS	USGZ 0269 985170000988946	FEMALE	96 MONTHS
0262 985170001022351	FEMALE	84 MONTHS	0270 985170001005543	FEMALE	60 MONTHS
0263 985170001004052	NEUTER	96 MONTHS	0271 985170000984309	NEUTER	108 MONTHS
0264 985170001023646	FEMALE	60 MONTHS	0272 985170000985790	FEMALE	72 MONTHS
0265 985170000985889	NEUTER	24 MONTHS	0273 985170001000822	FEMALE	72 MONTHS
0266 985170001025724	FEMALE	108 MONTHS	0274 985170001001058	NEUTER	108 MONTHS
0267 985170001023050	NEUTER	120 MONTHS	0275 985170001017223	NEUTER	96 MONTHS
0268 985170001016063	NEUTER	108 MONTHS	0276 985170001006791	FEMALE	120 MONTHS

Mexico, Slaughter horse HC



Health Certificate No. **T11-18343**  
(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
USGZ 0277 985170001003061	FEMALE	120 MONTHS	USGZ 0284 985170001016079	FEMALE	120 MONTHS
0278 985170001000041	FEMALE	132 MONTHS	0285 985170000988392	NEUTER	96 MONTHS
0279 985170000988829	FEMALE	96 MONTHS	0286 985170000986126	FEMALE	108 MONTHS
0280 985170001008609	NEUTER	72 MONTHS	0287 985170001005620	FEMALE	108 MONTHS
0281 985170001040070	FEMALE	96 MONTHS	0288 985170001010980	FEMALE	120 MONTHS
0282 985170000988803	FEMALE	96 MONTHS	0289 985170000986810	NEUTER	132 MONTHS
0283 985170001008968	FEMALE	72 MONTHS	0290 985170001005779	FEMALE	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 5/4/11

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.*

[illegible]

**Mexico Slaughter Horses Health Certificate**  
**April 2, 2009**





Health Certificate No. T11-18343  
(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)

(b)(6)

Signature of Accredited Veterinarian and Date  
Veterinarian  
*Firma del Médico Veterinario Acreditado  
y Fecha 5/5/11*

Signature of Endorsing Federal Veterinarian  
*Firma del Médico Veterinario que endosa  
y Fecha 5/5/11*

(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

<p align="center"><b>U.S. DEPARTMENT OF AGRICULTURE</b> ANIMAL AND PLANT HEALTH INSPECTION SERVICE</p> <p align="center"><b>OWNERSHIP CERTIFICATE</b> <b>FITNESS TO TRAVEL TO A SLAUGHTER FACILITY</b> <small>(Please type or print in ink)</small></p>		<p><small>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.</small></p>		<p align="center"><b>FORM APPROVED</b> <b>OMB NO.</b> <b>0579-0160</b></p>																																																																																																																																																																																																																																																																																																																																														
HORSES LOADED ON CONVEYANCE <i>9:00 AM</i>		DATE <i>5-05-11</i>		CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <i>Eagle Pass TX</i>																																																																																																																																																																																																																																																																																																																																														
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COLOR DESCRIPTION							BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS (include existing conditions)	Bay	Gray	Blk	Pinto	Chest	Other	TB	QT	Draft	Pony	Other	Male	Stall	Geld	4820261						✓			✓					✓			<i>24H</i>	985 170 001 010 677			62					✓			✓					✓			<i>24H</i>	985 170 001 022 351			63	✓							✓								<i>24H</i>	985 170 001 004 052			64					✓			✓					✓			<i>60H</i>	985 170 001 023 646			65					✓			✓								<i>✓ 24H</i>	985 170 000 985 889			66					✓			✓					✓			<i>102H</i>	985 170 001 025 724			67						✓		✓								<i>✓ 120H</i>	985 170 001 023 050			68					✓			✓								<i>✓ 102H</i>	985 170 001 016 063			69	✓							✓					✓			<i>✓ 92H</i>	985 170 000 998 946			70	✓							✓					✓			<i>✓ 72H</i>	985 170 001 005 543			71				✓				✓								<i>✓ 102H</i>	985 170 000 984 309			72	✓							✓					✓			<i>✓ 12H</i>	985 170 000 985 790			73	✓							✓					✓			<i>✓ 12H</i>	985 170 001 000 822			74						✓		✓								<i>✓ 102H</i>	985 170 001 001 058		4581	75					✓			✓								<i>✓ 102H</i>	985 170 001 017 223	
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U.S. DEPARTMENT OF AGRICULTURE  
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

OWNER/SHIPPER CERTIFICATE  
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY  
(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 0579-0150. 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.  
0579-0150

TAG PREFIX	Tag NO.	COLOR DESCRIPTION							BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Grey	Blk	Pink	Chest	Other	TB	QT	Draft	Pony	Other	Male	Stal	Gold			
1552	0576	✓							✓				✓		120H	985 170 001 006 791		
17	77	✓							✓				✓		120H	985 170 001 003 061		
18	77					✓			✓				✓		120H	985 170 001 000 041		
19	79					✓			✓				✓		96H	985 170 000 988 829		
20	80		✓						✓						72H	985 170 001 008 609		
21	81	✓							✓				✓		96H	985 170 001 040 070		
22	82							✓	✓				✓		96H	985 170 000 988 803		
23	83					✓			✓				✓		72H	985 170 001 008 968		
24	84					✓			✓				✓		120H	985 170 001 016 079		
25	85					✓			✓						ALH	985 170 000 988 392		
26	86							✓	✓				✓		102H	985 170 000 986 126		
27	87				✓				✓				✓		102H	985 170 001 005 620		
28	88							✓	✓				✓		120H	985 170 001 010 980		
29	89		✓						✓						72H	985 170 000 986 810		
30	90				✓				✓				✓		102H	985 170 001 005 779		
31	91					✓			✓				✓		96H	985 170 001 006 929		
32	92					✓			✓						96H	985 170 001 006 310		
33	93					✓			✓				✓		102H	985 170 001 022 584		
34	94	✓							✓				✓		102H	985 170 001 038 701		
35	95							✓	✓				✓		102H	985 170 001 010 284		
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I HEREBY AUTHORIZE THE CIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

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





Health Certificate No. T11-18344  
(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
USGZ 0226 985170000982614	FEMALE	120 MONTHS	USGZ 0234 985170000988562	FEMALE	120 MONTHS
0227 985170001007664	NEUTER	96 MONTHS	0235 985170001007732	FEMALE	120 MONTHS
0228 985170001029470	FEMALE	24 MONTHS	0236 985170001015596	NEUTER	144 MONTHS
0229 985170001026181	NEUTER	96 MONTHS	0237 985170001003515	NEUTER	108 MONTHS
0230 985170001036221	NEUTER	96 MONTHS	0238 985170000983930	FEMALE	120 MONTHS
0231 985170000985126	FEMALE	108 MONTHS	0239 985170001005638	NEUTER	24 MONTHS
0232 985170000984876	FEMALE	108 MONTHS	0240 985170000988284	FEMALE	96 MONTHS
0233 985170001005381	FEMALE	24 MONTHS	0241 985170000983889	FEMALE	84 MONTHS

Mexico, Slaughter horse HC



Health Certificate No. **T11-18344**  
(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
USGZ 0242 985170000983701	FEMALE	84 MONTHS	USGZ 0249 985170001015503	FEMALE	96 MONTHS
0243 985170001039395	FEMALE	84 MONTHS	0250 985170001024688	FEMALE	96 MONTHS
0244 985170000999281	FEMALE	96 MONTHS	0251 985170001006766	NEUTER	108 MONTHS
0245 985170001003414	FEMALE	108 MONTHS	0252 985170001036229	FEMALE	108 MONTHS
0246 985170000988573	NEUTER	108 MONTHS	0253 985170001004324	NEUTER	108 MONTHS
0247 985170001038557	NEUTER	108 MONTHS	0254 985170000995908	NEUTER	72 MONTHS
0248 985170001022791	FEMALE	96 MONTHS	0255 985170001023509	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 5/4/11
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.*

[illegible]

**Mexico Slaughter Horses Health Certificate**  
**April 2, 2009**





Health Certificate No. **T11-18344**  
(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)

(b)(6)

*DVM*

Signature of Accredited Veterinarian and Date  
Veterinarian  
*Firma del Médico Veterinario Acreditado  
y Fecha 5/5/11*

Signature of Endorsing Federal Veterinarian  
*Firma del Médico Veterinario que endosa  
y Fecha 5/5/11*

(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

<p align="center"><b>U.S. DEPARTMENT OF AGRICULTURE</b> ANIMAL AND PLANT HEALTH INSPECTION SERVICE</p> <p align="center"><b>OWNER/SHIPPER CERTIFICATE</b> <b>FITNESS TO TRAVEL TO A SLAUGHTER FACILITY</b> <i>(Please type or print in ink)</i></p>	<p><small>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.</small></p> <p align="right"><b>FORM APPROVED</b> <b>OMB NO.</b> <b>0579-0160</b></p>
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TIME HORSES LOADED ON CONVEYANCE 11:00 P.M.	DATE 5-05-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Eagle Pass TX
(b)(6)		NAME OF AUCTION/MARKET N/A
CONSIGNEE (RECEIVER/DESTINATION) NAME J+B Learning Co		CONSIGNEE (RECEIVER/DESTINATION) NAME Chapman Jr Sheriff J.P. de C.U.
STREET ADDRESS 994 Vista Hermosa		STREET ADDRESS Chantrea Sheriff Station Room 275
CITY, STATE, ZIP CODE Eagle Pass TX 79852		CITY, STATE, ZIP CODE Sheriff Chantrea House P.O. 99390
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**

<input checked="" type="checkbox"/> Pregnant mares are not likely to foal (give birth) during the trip.	<input checked="" type="checkbox"/> Horses are able to bear weight on all 4 limbs.
<input checked="" type="checkbox"/> Foals are older than 6 months of age.	<input checked="" type="checkbox"/> Horses are not blind in both eyes.
	<input checked="" type="checkbox"/> 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	Gold		
4582	2246	✓							✓				✓			120H	985 170 000 982 614
2	27				✓				✓							✓	985 170 001 007 664
3	28	✓							✓				✓			24H	985 170 001 029 470
4	29				✓				✓							✓	985 170 001 026 181
5	30					✓			✓							✓	985 170 001 036 221
6	31			✓					✓				✓			10H	985 170 000 985 126
7	32					✓			✓				✓			10H	985 170 000 984 876
8	33						✓		✓				✓			24H	985 170 001 005 381
9	34						✓		✓				✓			120H	985 170 000 988 562
10	35				✓				✓				✓			120H	985 170 001 007 732
11	36			✓					✓							✓	985 170 001 015 596
12	37					✓			✓							✓	985 170 001 003 515
13	38							✓	✓				✓			120H	985 170 000 983 930
14	39	✓							✓							✓	985 170 001 005 638
5462	40						✓		✓				✓			✓	985 170 000 988 284

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY PRIOR TO LOADING. SIGNATURE: (b)(6) HEREBY AFFIRM THAT THE INFORMATION CONTAINED IN THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. (b)(6)	<b>CANADIAN FOOD INSPECTION AGENCY (CFIA)</b> EST. _____ DATE _____ TIME _____ <b>DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)</b> EST. _____ DATE _____ TIME _____
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(Please type or print in bold)

According to the Paperwork Reduction Act of 1996, 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 0573-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM  
APPROVED  
OMB NO.  
0579-0160

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
		Bay	Gray	Blk.	Pinto	Chestn.	Other	TR	QT	Doelt	Pony	Other	Mare	Stall	Gold		
1562	41					✓			✓				✓			85H	985 170 000 983 889
	42				✓				✓				✓			85H	985 170 000 983 701
	43					✓			✓				✓			85H	985 170 001 039 395
	44					✓			✓				✓			96H	985 170 000 999 281
	45					✓			✓				✓			101H	985 170 001 003 414
	46					✓			✓							101H	985 170 000 988 573
	47					✓			✓							101H	985 170 001 038 557
	48					✓			✓				✓			96H	985 170 001 022 791
	49			✓					✓				✓			96H	985 170 001 015 503
	50					✓			✓				✓			96H	985 170 001 024 688
	51			✓					✓							101H	985 170 001 006 766
	52						✓		✓				✓			101H	985 170 001 036 229
	53			✓					✓							101H	985 170 001 004 324
	54	✓							✓							120H	985 170 000 995 908
	55	✓							✓				✓			120H	985 170 001 023 509
	56	✓							✓				✓			120H	985 170 001 011 127
	57					✓			✓							96H	985 170 001 038 748
	58						✓		✓							96H	985 170 001 006 389
	59			✓					✓				✓			101H	985 170 001 008 446
1562	60						✓		✓							101H	985 170 001 010 336

HEREBY AUTHORIZE THE CIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CIA 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 declare 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

(b)(6)

Control Number: 8101B0386

Office Id: 978101

Service Date(s)

Begin: 29-APR-11

End: 05-MAY-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	10.00	520.00

Total Due \$ 520.00

Remarks: 17-140's T11-18335 @ T11-18344

Payment Information

Nfc Id  
451522562VA

Date	Amount	Payment Type	Account/Check #
06-MAY-11	\$ 520.00	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. **T11-16865**  
(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)(6) (b)(6) (b)(6)

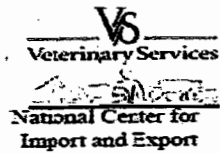
2. Name and Address of Importer:

Carnicos de Jerez, S.A. de C.V.  
Nombre y Dirección del Importador: Carretera Jerez Sanchez Roman KM 27.5  
Jerez, Zacatecas, Mexico 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
USFR 5901 985170001017842	GELDING	60 MONTHS	USFR 5902 985170001014949	MARE	36 MONTHS
USFR 5903 985170001008373	MARE	84 MONTHS	USFR 5904 985170001026212	MARE	132 MONTHS
USFR 5905 985170001026259	MARE	72 MONTHS	USFR 5906 985170001000442	MARE	48 MONTHS
USFR 5907 985170000988711	MARE	96 MONTHS	USFR 5908 985170001010958	MARE	144 MONTHS
USFR 5909 985170000987358	GELDING	24 MONTHS	USFR 5910 985170000988441	MARE	96 MONTHS
USFR 5911 985170001025011	MARE	60 MONTHS	USFR 5912 985170000991951	MARE	120 MONTHS
USFR 5913 985170001016673	GELDING	48 MONTHS	USFR 5914 985170001038721	GELDING	108 MONTHS
USFR 5915 985170000992559	GELDING	72 MONTHS	USFR 5916 985170001013743	MARE	144 MONTHS

4/29/11



Health Certificate No. T11-16865  
(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>
USFR 5917 985170000990078	GELDING	60 MONTHS	USFR 5918 985170000987097	GELDING	84 MONTHS
USFR 5919 985170000993873	GELDING	36 MONTHS	USFR 5920 985170000990383	MARE	96 MONTHS
USFR 5921 985170001015756	MARE	156 MONTHS	USFR 5922 985170000989059	MARE	108 MONTHS
USFR 5923 985170001012107	GELDING	72 MONTHS	USFR 5924 985170001013459	GELDING	24 MONTHS
USFR 5925 985170001005344	MARE	132 MONTHS	USFR 5926 985170001011668	GELDING	96 MONTHS
USFR 5927 985170001027939	MARE	60 MONTHS	USFR 5928 985170000988475	MARE	48 MONTHS
USFR 5929 985170001024784	GELDING	144 MONTHS	USFR 5930 985170000984366	GELDING	108 MONTHS
USFR 5931 985170000982923	MARE	36 MONTHS	USFR 5932 985170001010866	MARE	60 MONTHS





Health Certificate No. **T11-16865**  
(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

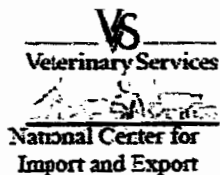
**CERTIFICATION STATEMENTS / CERTIFICACIONES**

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 04/28/2011

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. T11-16865  
(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.]

*Michael J. [Signature]*

Name of Accredited Veterinarian

Nombre del Medico Veterinario

Acreditado

*Darrell L. Honey, DVM*

Name of Endorsing Federal Veterinarian

Nombre del Medico Veterinario

Federal que endosa.

(b)(6)

Signature of Accredited Veterinarian and Date

Firma del Medico Veterinario Acreditado

Y Fecha

4/28/11

(b)(6)

Signature of Endorsing Federal Veterinarian  
and Date

Firma del Medico Veterinario que endosa

Y Fecha

4-29-11

(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 T11-16865 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 T11-16865 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.

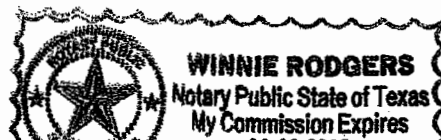
*Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.*

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 4/28/11  
*Fecha y firma del exportador*

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





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  
T11-16865

HORSES LOADED ON CONVEYANCE :00 PM		DATE 04/28/2011	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Waco, TX
VEHICLE LICENSE NO. AND DRIVER'S NAME (b)(6)			NAME OF AUCTION/MARKET NA
SIGNOR (OWNER/SHIPPER) NAME (b)(6)			CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.
STREET ADDRESS (b)(6)			STREET ADDRESS Carretera Jerez Sanchez Roman KM 27.5
CITY, STATE, ZIP CODE (b)(6) TX (b)(6)			CITY, STATE, ZIP CODE Jerez, Zacatecas Mexico 99380
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

<input checked="" type="checkbox"/> Pregnant mares are not likely to foal (give birth) during the trip.	<input checked="" type="checkbox"/> Horses are able to bear weight on all 4 limbs.	<input checked="" type="checkbox"/> Horses are able to walk unassisted.
<input checked="" type="checkbox"/> Foals are older than 6 months of age.	<input checked="" type="checkbox"/> 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	USFR	5901		X						X						X	60 MONTHS	985170001017842
2	USFR	5902					X			X				X			36 MONTHS	985170001014949
3	USFR	5903						X		X				X			84 MONTHS	985170001008373
4	USFR	5904	X							X				X			132 MONTHS	985170001026212
5	USFR	5905					X			X				X			72 MONTHS	985170001026259
6	USFR	5906					X			X				X			48 MONTHS	985170001000442
7	USFR	5907	X							X				X			96 MONTHS	985170000988711
8	USFR	5908					X			X				X			144 MONTHS	985170001010958
9	USFR	5909	X							X						X	24 MONTHS	985170000987358
10	USFR	5910					X			X				X			96 MONTHS	985170000988441
11	USFR	5911						X		X				X			60 MONTHS	985170001025011
12	USFR	5912	X							X				X			120 MONTHS	985170000991951
13	USFR	5913				X				X						X	48 MONTHS	985170001016673
14	USFR	5914	X							X						X	108 MONTHS	985170001038721
15	USFR	5915						X		X						X	72 MONTHS	985170000992559

(b)(6)

FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS PRIOR TO LOADING INTO CONVEYANCE.

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 SUBMITTING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$5,000 OR 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.

<b>CANADIAN FOOD INSPECTION AGENCY (CFIA)</b>	
EST.	_____
DATE	_____
TIME	_____
<b>DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)</b>	
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  
T11-16865

	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	USFR	5916	X							X				X			144 MONTHS	985170001013743
17	USFR	5917				X				X						X	60 MONTHS	985170000990078
18	USFR	5918	X							X						X	84 MONTHS	985170000987097
19	USFR	5919	X									X				X	36 MONTHS	985170000993873
20	USFR	5920						X		X				X			96 MONTHS	985170000990383
21	USFR	5921	X							X				X			156 MONTHS	985170001015756
22	USFR	5922		X						X				X			108 MONTHS	985170000989059
23	USFR	5923					X			X						X	72 MONTHS	985170001012107
24	USFR	5924		X						X						X	24 MONTHS	985170001013459
25	USFR	5925					X			X				X			132 MONTHS	985170001005344
26	USFR	5926						X		X						X	96 MONTHS	985170001011668
27	USFR	5927	X							X				X			60 MONTHS	985170001027939
28	USFR	5928	X							X				X			48 MONTHS	985170000988475
29	USFR	5929					X			X						X	144 MONTHS	985170001024784
30	USFR	5930				X				X						X	108 MONTHS	985170000984366
31	USFR	5931					X				X			X			36 MONTHS	985170000982923
32	USFR	5932					X				X			X			60 MONTHS	985170001010866
33																		
34																		
35																		
36																		
37																		
38																		
39																		
40																		
41																		
42																		
43																		
44																		
45																		

(b)(6)

HIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION  
SIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR  
OR BOTH (18 U.S.C. SECTION 1001).

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



CONVENIENCE STORES, INC.  
P.O. BOX 1907  
CLOVIS, NEW MEXICO 88102-1907

# MONEY ORDER

NOT VALID FOR OVER THREE HUNDRED U.S. DOLLARS

PAYABLE THROUGH  
NEW MEXICO BANK & TRUST  
CLOVIS, NEW MEXICO 88101

95-674/1070

51450562

DATE

4/28/11

\$ \* 52 00 00 00

Fifty Two AND 00/100  
U.S. Dollars

Alt's #122

PAY  
TO THE  
ORDER OF

USDA

For Account No  
or Invoice No

711-16865

Trena Sawyer 730 old Apt 111

PURCHASER'S NAME & ADDRESS

(b)(6)

PURCHASER BY SIGNING YOU AGREE TO THE SERVICE  
CHARGE AND OTHER TERMS ON THE REVERSE SIDE.

AUTHORIZED  
SIGNATURE

THIS M

122  
AUTHORIZED SIGNATURE

⑆ 107006745⑆ 7851450562 ⑈



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

Originating Office Phone

Control Number: 850110138

Office Id: 978501

(b)(6)

Service Date(s)

Begin: 29-APR-11

End: 29-APR-11

Reference NR:

Code	Description	APHIS USE ONLY Accounting Code/BOC	Unit Cost	# of Units	Total Dollars
101	Slaughter Animals To Can Or Mx	1759785177 0250	52.00	1.00	52.00

Total Due \$ 52.00

Remarks: 1-HEALTH CERT.# T11-16865,32 HORSES (4-29-11)

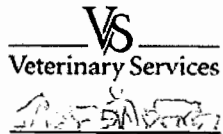
Payment Information

Nfc Id  
9999999999V

Date	Amount	Payment Type	Account/Check #
29-APR-11	\$ 52.00	Money Order	514505662

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. T11-18313  
(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:*

(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.**

**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 8851 985170000997554	Mare	72 Months	USGV 8859 985170001024464	Gelding	72 Months
USGV 8852 985170000990310	Gelding	60 Months	USGV 8860 985170001004194	Mare	60 Months
USGV 8853 985170001001518	Mare	48 Months	USGV 8861 985170001012140	Gelding	72 Months
USGV 8854 985170000988729	Gelding	72 Months	USGV 8862 985170000986558	Gelding	108 Months
USGV 8855 985170001015499	Gelding	60 Months	USGV 8863 985170000987184	Mare	60 Months
USGV 8856 985170001045302	Gelding	48 Months	USGV 8864 985170000994802	Gelding	72 Months
USGV 8857 985170000992958	Mare	60 Months	USGV 8865 985170000993561	Gelding	108 Months
USGV 8858 985170000993897	Gelding	84 Months	USGV 8866 985170001013932	Mare	96 Months

Mexico, Slaughter horse HC

4/29/11



Health Certificate No. T11-18313  
(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 8867 985170001014937	Mare	84 Months	USGV 8874 985170000991669	Gelding	108 Months
USGV 8868 985170001013492	Gelding	108 Months	USGV 8875 985170000990796	Gelding	72 Months
USGV 8869 985170001008839	Gelding	72 Months	USGV 8876 985170000993496	Mare	72 Months
USGV 8870 985170001024453	Mare	108 Months	USGV 8877 985170001047297	Mare	36 Months
USGV 8871 985170001036141	Mare	72 Months	USGV 8878 840003006151139	Mare	48 Months
USGV 8872 985170001025104	Mare	84 Months	USGV 8879 985170000997991	Gelding	72 Months
USGV 8873 985170000991035	Mare	108 Months	USGV 8880 985170001044921	Gelding	36 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 4/28/11

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

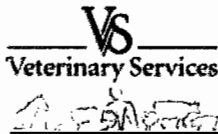
*Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.*

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.*



[illegible]Mexico Slaughter Horses Health Certificate  
April 2, 2009



Health Certificate No. T11-18313  
(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 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 H.L. Vogt

(b)(6)

(b)(6)

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 T11-18313 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 T11-18313 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*

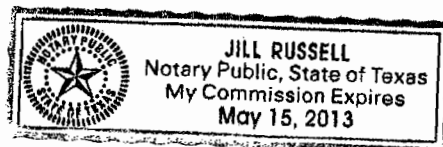
(b)(6)

4/18/11

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

(b)(6)

4/18/11





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

T11-18313

TIME HORSES LOADED ON CONVEYANCE 9:00P.m.	DATE 4-28-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Brookston, Texas 75421
(b)(6)		NAME OF AUCTION/MARKET N/A
(b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.
STREET ADDRESS (b)(6)		STREET ADDRESS Carretera Jerez Sanchez Roman KM 27.5
CITY, STATE, ZIP CODE (b)(6) Texas (b)(6)		CITY, STATE, ZIP CODE Jerez, Zacatecas, Mexico, C.P. 99380
AREA CODE & TELEPHONE NO. (b)(6)		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	8851						Rn		X				X			72	985170000997554
2	USGV	8852	X							X						X	60	985170000990310
3	USGV	8853						Sr		X				X			48	985170001001518
4	USGV	8854	X							X						X	72	985170000988729
5	USGV	8855						Pt		X						X	60	985170001015499
6	USGV	8856						Dn		X						X	48	985170001045302
7	USGV	8857						Sr		X				X			60	985170000992958
8	USGV	8858						Pt		X						X	84	985170000993897
9	USGV	8859						Pt		X						X	72	985170001024464
10	USGV	8860						Bs		X				X			60	985170001004194
11	USGV	8861	X							X						X	72	985170001012140
12	USGV	8862						Pt		X						X	108	985170000986558
13	USGV	8863	X							X				X			60	985170000987184
14	USGV	8864						Sr		X						X	72	985170000994802
15	USGV	8865						Pt		X						X	108	985170000993561

HORSES HAVE BEEN WATERED AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS IMMEDIATELY PRIOR TO LOADING	CANADIAN FOOD INSPECTION AGENCY (CFIA) EST. _____ DATE _____ TIME _____ DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF) EST. _____ DATE _____ TIME _____
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)	

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  
T11-18313

	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	8866			X					X				X			96	985170001013932
17	USGV	8867	X							X				X			84	985170001014937
18	USGV	8868						Sr		X						X	108	985170001013492
19	USGV	8869						Sr		X						X	72	985170001008839
20	USGV	8870		X						X				X			108	985170001024453
21	USGV	8871	X							X				X			72	985170001036141
22	USGV	8872						Pl		X				X			84	985170001025104
23	USGV	8873		X						X				X			108	985170000991035
24	USGV	8874						Bn		X						X	108	985170000991669
25	USGV	8875			X					X						X	72	985170000990796
26	USGV	8876	X							X				X			72	985170000993496
27	USGV	8877						Sr		X				X			36	985170001047297
28	USGV	8878		X						X				X			48	840003006151139
29	USGV	8879						Sr		X						X	72	985170000997991
30	USGV	8880						Bn					ML			X	36	985170001044921
31	USGV	8881						Pt		X						X	72	981020005246570
32	USGV	8882		X									ML	X			108	985170001009837
33																		
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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).

SIGNA (b)(6) d 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: 8101B0379  
Office Id: 978101

(b)(6)

Service Date(s)  
Begin: 29-APR-11  
End: 29-APR-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# T11-18313

Payment Information

Nfc Id  
9999999999V

Date	Amount	Payment Type	Account/Check #
29-APR-11	\$ 52.00	Money Order	3195023562

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.

4485



Health Certificate No. 71117627  
(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
059639	mare	96months	105355	gelding	96months
048465	gelding	96months	050161	mare	48months
057802	gelding	84months	095544	gelding	96months
103344	gelding	84months	061645	mare	72months
041666	gelding	84months	084813	gelding	84months
054877	gelding	144months	095627	mare	36months
105585	gelding	120months	056026	gelding	48months
104525	mare	72months	082287	gelding	84months

Mexico, Slaughter horse HC

4/29/11





Health Certificate No. 7112627  
(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
083685	mare	144months	087427	mare	84months
084351	mare	120months	093055	mare	60months
099185	gelding	108months	057901	mare	120months
040341	mare	72months	043059	mare	36months
104161	mare	60months	104446	mare	24months
104574	gelding	84months	083437	mare	48months
092470	mare	120months	098625	mare	120months

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 April 27, 2011

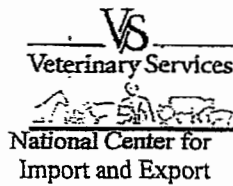
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

*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.*

Mexico, Slaughter horse HC



Health Certificate No. 7117627  
 (Valid only if the USDA Veterinary Seal  
 Appears over the Certificate Number)

CU 13

(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-1994)]*

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)

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

4-27-11

(b)(6)

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

4-29-11

(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

cwb

AFFIDAVIT  
DECLARACIÓN JURADA

I (print) <sup>(b)(6)</sup> [redacted] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 71117627 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 71117627 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*

<sup>(b)(6)</sup> [redacted]

4/27/2011

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

<sup>(b)(6)</sup> [redacted]

4/27/2011



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

1117627

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

TIME HORSES LOADED ON CONVEYANCE

1:30

(b)(6)

DATE

4/17/11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Morton Texas

NAME OF AUCTION/MARKET

FEN 25

CONSIGNOR (OWNER/SHIPPER) NAME

Beltz Seedlot

STREET ADDRESS

3180 CR 120

CITY, STATE, ZIP CODE

Morton Texas 79346

AREA CODE & TELEPHONE NO.

(626) 525-4221

CONSIGNEE (RECEIVER/DESTINATION) NAME

Baeza Cattle Co

STREET ADDRESS

Cattle Drive

CITY, STATE, ZIP CODE

Presidio, Texas

AREA CODE & TELEPHONE NO.

(626) 453-1001

HO 28

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		
EST	6998																059639
	6999																105355
	7000																048465
	7001																050161
	7002																057802
	7003																095544
	7004																103344
	7005																061645
	7006																041666
	7007																084813
	7008																054877
	7009																095627
	7010																105585
	7011																056026
EST	7012																104525

OR (b)(6) NUMBER OF 6 CONSECUTIVE

OUR

GN

HER

COMPLETED BY THE CHA OR DCM 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)

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



**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

7117627

	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	055T	7013					✓					✓				✓	Ast. hip	082287	
17		7014		✓								✓		✓				083685	
18		7015					✓					✓		✓				087427	
19		7016					✓					✓		✓				084351	
20		7017				✓						✓		✓				093055	
21		7018	✓									✓				✓		099185	
22		7019					✓					✓		✓				057901	
23		7020		✓								✓		✓				040341	
24		7021	✓									✓		✓				043059	
25		7022					✓					✓		✓				104161	
26		7023		✓								✓		✓				104446	
27		7024	✓									✓				✓		104574	
28		7025					✓					✓		✓				083437	
29		7026						APP				✓		✓				092470	
30	055T	7027					✓					✓		✓			Ast. hip	098625	
31																			
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I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGN (b)(6) is true and correct to the best of my knowledge.)

C64-12



Health Certificate No. 71117628  
(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/Sexo	Approximate age/Edad <i>aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / Sexo	Approximate age/ Edad <i>aproximada</i>
298546	mare	84months	256049	mare	84months
304535	mare	48months	306383	gelding	48months
302576	gelding	72months	297496	mare	108months
304969	mare	84months	301387	gelding	60months
299725	gelding	72months	307934	mare	48months
333285	mare	48months	303638	mare	72months
297798	gelding	108months	248025	mare	84months
262745	mare	36months	297991	mare	48months



Health Certificate No. 71117628  
(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
305238	mare	96months	262512	gelding	72months
308404	mare	96months	259488	mare	84months
346794	gelding	120months	334545	gelding	84months
356374	gelding	96months	304925	mare	108months
299647	mare	24months	250265	mare	36months
305102	mare	36months	239227	mare	36months
Total:28hd					

#### 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 April 28, 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. 1117628  
(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 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-1994)]

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

W H BROWN D.V.M.  
Name of Endorsing Federal Veterinarian  
Nombre del Médico Veterinario  
Federal que endosa.

(b)(6)

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

4-29-11

(b)(6)

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

4-29-11

(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).



AFFIDAVIT  
DECLARACIÓN JURADA

CUSA

I (print) <sup>(b)(6)</sup> [redacted] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 71117628 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 71117628 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*

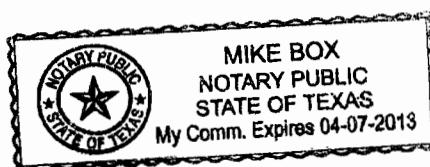
<sup>(b)(6)</sup> [redacted]

4/28/2011

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

<sup>(b)(6)</sup> [redacted]

4/28/2011



TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE  
Morton Texas

VEHICLE LICENSE NO. AND DRIVER'S NAME

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME  
Beltop Feedlot

CONSIGNEE (RECEIVER/DESTINATION) NAME  
Baeza Cattle Co

STREET ADDRESS  
2180 C.R. 120

STREET ADDRESS  
Cattle Drive

CITY, STATE, ZIP CODE  
Morton IL

CITY, STATE, ZIP CODE  
Presidio IL

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.☒ 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	USGT 8034	✓										✓	✓				298546
2	8035					✓						✓	✓				256049
3	8036			✓								✓	✓				304535
4	8037		✓									✓			✓		306383
5	8038						DUN					✓			✓		302576
6	8039				✓							✓	✓				297496
7	8040						DUN					✓	✓				304969
8	8041	✓										✓			✓		301387
9	8042						BRN					✓			✓		299725
10	8043					✓						✓	✓				307934
11	8044	✓										✓	✓				333285
12	8045					✓						✓	✓				303638
13	8047					✓						✓			✓		297798
14	8049	✓										✓	✓				248025
15	USGT 8050						BRN					✓	✓				262745

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

SIGNATURE (b)(6)

HEREBY CERTIFYING THAT THE INFORMATION IN IT AS 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)

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 \_\_\_\_\_

USDA

as editions are obsolete

INSPECTOR

PAGE 1 OF 2

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  
T117628

	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	USGT	8051						ALB						✓	✓			ART	297991
17		8052						BRN						✓	✓				305238
18		8053					✓							✓			✓		262512
19		8056						BRN						✓	✓				308404
20		8057					✓							✓	✓				259488
21		8059					✓							✓			✓		346794
22		8060		✓										✓			✓		334545
23		8061						BRN						✓			✓		356374
24		8062				✓								✓	✓				304925
25		8065						DUN						✓	✓				299647
26		8066			✓									✓	✓				250265
27		8067						DUN						✓	✓				305102
28	USGT	8068					✓							✓	✓			ART	239227
29																			
30																			
31																			
32																			
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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)

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

2013



Health Certificate No. TL117630  
(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**

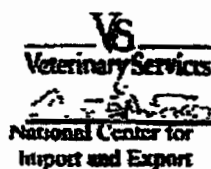
**Note:** Mexico will only accept this shipment if VS Form 10-13 and affidavit for residue are completed and presented at the border with this Health Certificate (HC). VS Form 10-13 must have HC number written in the right upper corner. Mexico will not accept sexually intact males and monorchid animals.

**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
053088	mare	72months	048524	mare	108months
050041	gelding	132months	051083	mare	120months
057188	mare	108months	104985	mare	120months
045166	mare	96months	047603	mare	132months
096165	gelding	108months	099195	mare	84months
104992	gelding	72months	103145	mare	120months
092080	mare	96months	088170	mare	108months
089179	mare	120months	053255	mare	84months





Health Certificate No. TL117630  
 (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
082996	mare	84months	082515	mare	84months
081391	mare	108months	089437	mare	72months
102160	mare	132months	088912	mare	84months
053548	mare	84months	105439	mare	108months
083885	mare	72months	093323	mare	96months
045307	gelding	96months	103546	gelding	144months
088432	mare	108months	088850	mare	108months
095115	mare	96months	052328	mare	72months
041929	mare	72months	087116	mare	84months
093374	mare	72months			
Total:35hd					

Cat



Health Certificate No. T1117630  
(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 April 27, 2011

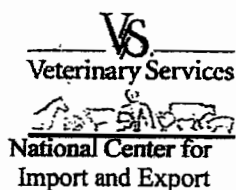
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

*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



Health Certificate No. 71117630  
 (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 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-1994)]*

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)

4-27-11

Signature of Accredited veterinarian and Date

Firma del Médico Veterinario Acreditado

y Fecha

(b)(6)

4-29-11

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).

copy

AFFIDAVIT  
DECLARACIÓN JURADA

I (print (b)(6) Be/Hex Corp) declare that the horses included in this shipment and accompanied by the health certificate number 7117630 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 7117630 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.

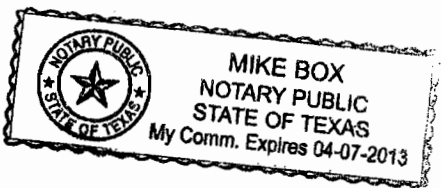
*Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.*

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) 4/28/2011  
*Fecha y firma del exportador*

Date and signature of the Notary Public (b)(6) 4/28/2011  
*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

7779630

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
		Morton Texas
VEHICLE LICENSE NO. AND DRIVER'S NAME	NAME OF AUCTION/MARKET	

CONSIGNOR (OWNER/SHIPPER) NAME	CONSIGNEE (RECEIVER/DESTINATION) NAME
Belter Feedlot	Baena Cattle Co
STREET ADDRESS	STREET ADDRESS
2180 C.R. 120	Cattle Drive
CITY, STATE, ZIP CODE	CITY, STATE, ZIP CODE
Morton IL	Presidio IL
AREA CODE & TELEPHONE NO.	AREA CODE & TELEPHONE NO.
(806) 525-4221	(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. ☒ 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		
1	USGT	8069			✓							✓	✓				Art 053088
2		8070	✓									✓	✓				048524
3		8071					✓					✓			✓		050041
4		8072						BRN				✓	✓				051083
5		8073				✓						✓	✓				057185
6		8074	✓									✓	✓				104985
7		8075			✓							✓	✓				045166
8		8076	✓									✓	✓				047603
9		8077					✓					✓			✓		096165
10		8078					✓					✓	✓				099195
11		8079	✓									✓			✓		104992
12		8080					✓					✓	✓				103145
13		8081	✓									✓	✓				092080
14		8082					✓					✓	✓				088170
15	USGT	8083					✓					✓	✓			Art 089179	

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

SIGNATURE \_\_\_\_\_

I HEREBY CERTIFY THAT THE INFORMATION IN IT AS COMPLETED BY THE OWNER/SHIPPER IS TRUE AND CORRECT TO THE BEST OF HIS OR HER KNOWLEDGE. 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 \_\_\_\_\_

VS FORM \_\_\_\_\_

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

TL17630

	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	USGT	8084					✓						✓	✓			A <sup>pt</sup>	053255
17		8085	✓										✓	✓				082996
18		8086						Red					✓	✓				082515
19		8087						APP					✓	✓				081391
20		8088					✓						✓	✓				089437
21		8089	✓										✓	✓				102160
22		8090						APP					✓	✓				088912
23		8091	✓										✓	✓				053548
24		8092					✓						✓	✓				105439
25		8093	✓										✓	✓				083885
26		8094				✓							✓	✓				093323
27		8095		✓									✓			✓		045307
28		8096				✓							✓			✓		103546
29		8097				✓							✓	✓				088432
30		8098				✓							✓	✓				088850
31		8099				✓							✓	✓				095115
32		8100				✓							✓	✓				052328
33		8101					✓						✓	✓				041929
34		8102					✓						✓	✓				087116
35	USGT	8104					✓						✓	✓			A <sup>pt</sup>	093374
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).

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



Health Certificate No. 7117631  
(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
041263	gelding	120months	045256	gelding	96months
050853	mare	96months	087776	mare	96months
086955	mare	120months	088820	mare	108months
087034	gelding	144months	101874	gelding	132months
056716	mare	120months	088749	gelding	96months
097588	gelding	120months	040960	gelding	96months
062350	mare	120months	094715	gelding	108months
096509	gelding	144months	093728	mare	156months

Mexico, Slaughter horse HC

CEW03



Health Certificate No. 71117631  
(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
061240	mare	120months	101152	mare	96months
098921	gelding	108months	098559	mare	48months
061800	mare	60months	087670	gelding	156months
053299	mare	168months	084717	gelding	144months
099559	mare	60months	087366	mare	120months
047232	mare	96months	100404	gelding	156months
092855	mare	144months			

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 April 28, 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. 7117631  
(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 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-1994)]

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)

(b)(6)

4-29-11  
Signature of Accredited Veterinarian and Date  
Firma del Médico Veterinario Acreditado  
y Fecha

4-29-11  
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).

cutb

AFFIDAVIT  
DECLARACIÓN JURADA

I (print) <sup>(b)(6)</sup> [redacted] Beltex Corp declare that the horses included <sup>(b)(6)</sup> [redacted] accompanied by the health certificate number T1117631 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 T1117631 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*

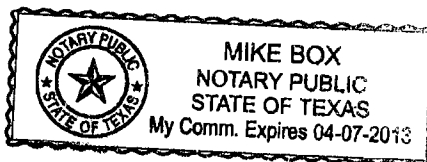
<sup>(b)(6)</sup> [redacted]

4/28/2011

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

<sup>(b)(6)</sup> [redacted]

4/28/2011



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

77117631

TIME HORSES LOADED ON CONVEYANCE 1:30	DATE 4/29/11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Morton Texas
(b)(6)	NAME OF AUCTION/MARKET	PEN 2H HD 28
Belted Feedlot	CONSIGNEE (RECEIVER/DESTINATION) NAME Baeza Cattle Co.	
STREET ADDRESS 2180 C.R. 120	STREET ADDRESS Cattle Drive	
CITY, STATE, ZIP CODE Morton, TX	CITY, STATE, ZIP CODE Presidio, TX	
AREA CODE & TELEPHONE NO. (806) 525-4221	AREA CODE & TELEPHONE NO. (926) 453-1001	

CHECK THE BOX THAT INDICATES THE FOLLOWING IS TRUE FOR ALL THE HORSES ON THIS CERTIFICATE																	
<input checked="" type="checkbox"/> Pregnant mares are not likely to foal (give birth) during the trip.																	
<input checked="" type="checkbox"/> Foals are older than 6 months of age.																	
<input type="checkbox"/> Horses are able to bear weight on all 4 limbs.																	
<input checked="" type="checkbox"/> Horses are not blind in both eyes.																	
<input checked="" type="checkbox"/> 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	USGT8005		✓									✓			✓	Art	041263
2	8006						APP					✓			✓		045256
3	8007						PAL					✓	✓				050853
4	8008	✓										✓	✓				087776
5	8009	✓										✓	✓				086955
6	8010						PAL					✓	✓				088820
7	8011						APP					✓			✓		087034
8	8012			✓								✓			✓		101874
9	8013	✓										✓	✓				056716
10	8014			✓								✓			✓		088749
11	8015					✓						✓			✓		097588
12	8016						DUN					✓			✓		040960
13	8017					✓						✓	✓				062350
14	8018						DUN					✓			✓		094715
15	USGT8019	✓										✓			✓	Art	096509

HORSES (b)(6)	MUM OF 6 CONSECUTIVE	CANADIAN FOOD INSPECTION AGENCY (CFIA)
HOURS		EST. _____ DATE _____ TIME _____
SIGNATURE	THE INFORMATION IN IT AS 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)
I HEREBY COMPLETE		EST. _____ DATE _____ TIME _____
SIGNATURE (b)(6)	in this form is true and correct to	
the b		
VS F	s editions are obsolete	PAGE 1 OF 2

**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  
AEN 24  
1117631

	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	USGT	8020						BUCK						✓	✓		APR	093728
17		8021	✓											✓	✓			061240
18		8022						DUN						✓	✓			101152
19		8023				✓								✓		✓		098921
20		8024	✓											✓	✓			098559
21		8025					✓							✓	✓			061800
22		8026					✓							✓		✓		087670
23		8027			✓									✓	✓			053299
24		8028						ALB						✓		✓		084717
25		8029				✓								✓	✓			099559
26		8030						ROAN						✓	✓			087346
27		8031						BRN						✓	✓			047232
28		8032	✓											✓		✓		100404
29	USGT	8033				✓								✓	✓		APR	092855
30																		
31																		
32																		
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34																		
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36																		
37																		
38																		
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).

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



**PRESIDIO PORT / HORSE EXPORT**

**Name and Address of Remitter:**

**Service Date**

**Beltex Corporation  
2180 CR 120  
Morton, Texas 79346**

**Begin:4-29-11**

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	
1	HCT 1117627	\$52.00	(30hd) 1	\$52.00
2	HCT 1117628	\$52.00	(28hd) 1	\$52.00
3	HCT 1117630	\$52.00	(35hd) 1	\$52.00
4	HCT 1117631	\$52.00	(29hd) 1	\$52.00
5				
6				
				<b>Total Due \$208.00</b>

**Payment Information**

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
4/29/2011	\$208.00	On Account	751522503VA
Check			
CASH			
Money Order			
Credit Card			

480138441

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

Originating Office Phone

Control Number: 4801B8441

512-383-2411

Office Id: 974801

Beltex Corporation

Service Date(s)

Po Box 427

Begin: 29-APR-11

Whiteface TX 79379

End: 29-APR-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 # T1117627, 7628, 7630, 7631

Payment Information

Nfc Id  
751522503VA

Date	Amount	Payment Type	Account/Check #
03-MAY-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.

(b)(6)

88-473/1123 176

DATE 28/Apr/11

PAY TO THE ORDER OF U. S. D.A. \$ 52.00

Amecenta y Dos Fin DOLLARS

Big Bend Banks 1<sup>ST</sup> PRESIDIO BANK  
P.O. BOX 2229  
PRESIDIO, TEXAS 79845

(b)(6)

(b)(6)

(b)(6)

Service Date 29  
4/28/2011

Code	Description	Unit Cost	# of Units	Total Dollars
1	HCT 1117632	\$52.00	(33hd) 1	\$52.00
2				
3				
4				
5				
6				
Total Due				\$52.00

#### Payment Information

Date	Amount	Payment Type	Account / Check #
		On Account	
<u>28</u> 4/29/2011	\$52.00	Check	176
		CASH	
		Money Order	
		Credit Card	

4601B 8448

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

Originating Office Phone

Control Number: 4801B8448

Office Id: 974801

Service Date(s)

Begin: 29-APR-11

End: 29-APR-11

Reference NR:

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

Total Due \$ 52.00

Remarks: Health Certificate # 1117632

Payment Information

Nfc Id  
9999999999V

Date	Amount	Payment Type	Account/Check #
03-MAY-11	\$ 52.00	Check	176

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

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



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

Originating Office Phone  
(b)(6)

Control Number: 4801B8450

Office Id: 974801

Service Date(s)

Begin: 29-APR-11

End: 29-APR-11

Reference NR:

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

Total Due \$ 104.00

Remarks: Health Certificate # T1117633, 7634

Payment Information

Nfc Id  
9999999999V

Date	Amount	Payment Type	Account/Check #
03-MAY-11	\$ 104.00	Check	178

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. 711-19140  
(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.

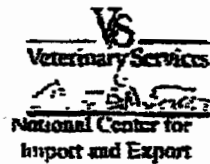
1. Name and Address of Exporter: Beltex Corporation  
Nombre y Dirección del Exportador: 3801 N Grove  
Fort Worth, Texas 76106
2. Name and Address of Importer: Empacadora de Carnes de Fresnillo  
Nombre y Dirección del Importador: Avenida Plateros #480, Zona Centro  
Fresnillo, Zacatecas  
Mexico, C.P. 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
105275	gelding	96months	058529	mare	120months
098089	gelding	120months	076196	gelding	120months
093321	mare	96months	299297	mare	108months
304320	gelding	84months	305131	gelding	48months
253379	gelding	60months	300582	mare	84months
299499	mare	60months	303210	mare	96months
302426	gelding	84months	244951	mare	48months
259235	mare	108months	299023	mare	60months

Mexico, Slaughter horse HC

4801B 9764

4/28/11



Health Certificate No. 711-19140  
 (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
300760	gelding	72months	239967	gelding	96months
308029	mare	108months	251216	mare	84months
303241	gelding	120months	308491	mare	60months
238957	mare	108months	297441	gelding	60months
302124	mare	108months	243427	gelding	120months
297686	gelding	84months	305611	gelding	84months
258233	mare	96months	257714	mare	96months
305752	gelding	120months	234979	mare	144months
304062	gelding	96months			
total: 33hd					



Health Certificate No. 711-19140  
(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 April 26, 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.*





(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.*]

Chris Larson D.V.M.

GRANT WEASE DVM  
USDA, APHIS, VETERINARY SVCS.  
EL PASO, TEXAS

Name of Accredited Veterinarian  
*Nombre del Médico Veterinario  
Acreditado*

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

(b)(6)

4-26-11  
rian and Date

*Firma del Médico Veterinario Acreditado  
y Fecha*

(b)(6)

Signature of Endorsing Federal veterinarian  
and Date

*Firma del Médico Veterinario que endosa  
y Fecha*

4/28/11

(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*).

**AFFIDAVIT  
DECLARACIÓN JURADA**

I (print <sup>(b)(6)</sup> [REDACTED] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number T11-19140 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 T11-19140 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*

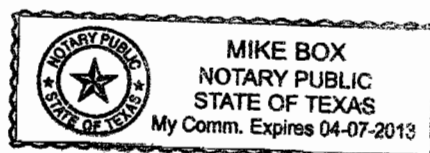
<sup>(b)(6)</sup> [REDACTED]

4/20/2011

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

Mike Box

4/20/2011



Pen 8

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  
711-19140

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

(b)(6)

CONSIGNOR (OWNER/SHIPPER) NAME

CONSIGNEE (RECEIVER/DESTINATION) NAME

STREET ADDRESS

STREET ADDRESS

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

AREA CODE & TELEPHONE NO.

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	WST	7895			✓											✓	Aut hip	105275
2		7896					✓							✓				058529
3		7897	✓													✓		098089
4		7898					✓									✓		076196
5		7900						BEN						✓				093321
6		7903						BEN						✓				299297
7		7904						APP								✓		304320
8		7905	✓													✓		305131
9		7906						Buck								✓		253379
10		7907						✓						✓				300582
11		7908						✓						✓				299499
12		7910						✓						✓				303210
13		7911						✓								✓		302426
14		7912						Pal						✓				244951
15	WST	7913			✓									✓			Aut hip	259235

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

SIGNATURE

I HEREBY CERTIFY THAT THE INFORMATION IN IT AS FURNISHED IS 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 the owner/shipper

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

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

lin 8  
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

711-19140

	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	EST	7914				✓							✓	✓				Aut. hip	899023
17		7915	✓										✓				✓		300760
18		7917	✓										✓				✓		239967
19		7918					Pal						✓	✓					308029
20		7919	✓										✓	✓					251216
21		7920					BLW						✓				✓		303241
22		7921					✓ Pal						✓	✓					308191
23		7922					✓ Pal						✓	✓					238957
24		7924					✓						✓				✓		297441
25		7927					BLW						✓	✓					302124
26		2928					BLW						✓				✓		243427
27		7929				✓							✓				✓		5297686
28		7930					✓						✓				✓		3052611
29		7931					✓						✓	✓					258233
30		7932	✓										✓	✓					257714
31		7933				✓							✓				✓		305752
32		7935					✓ BLW						✓	✓					234979
33	EST	7936					✓						✓				✓ Aut. hip		304062
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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).

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





Health Certificate No. 711-19141  
 (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
091214	gelding	60months	105590	mare	96months
084150	mare	108months	092937	gelding	120months
082106	mare	72months	060053	mare	120months
042714	mare	60months	099038	mare	96months
103390	gelding	120months	085044	mare	108months
057902	gelding	96months	096987	mare	84months
082862	mare	120months	104608	gelding	120months
057033	mare	96months	056441	mare	84months

Mexico, Slaughter horse HC



Health Certificate No. 711-19741  
 (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
096801	mare	120months	102378	mare	84months
082768	mare	96months	086384	mare	84months
054404	mare	108months	040731	mare	96months
058942	mare	84months	082985	gelding	120months
104242	mare	108months	083148	gelding	120months
104645	mare	144months	048376	mare	108months
Total:28hd					

#### 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 April 27, 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. 711-19141  
 (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 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-1994)]

GRANT WEASE DVM  
 USDA, APHIS, VETERINARY SVCS.  
 EL PASO, TEXAS

Chris Larson, D.V.M.

Name of Accredited Veterinarian  
 Nombre del Médico Veterinario  
 Acreditado

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

(b)(6)

(b)(6)

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**

I (prin (b)(6) Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number T11-19141 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 T11-19141 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*

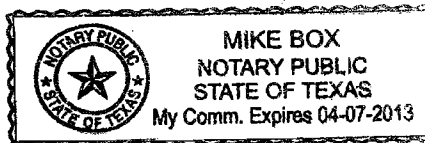
(b)(6)

4/27/2011

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

(b)(6)

4/27/2011





Page 7

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

711-19141

TIME HORSES LOADED ON CONVEYANCE 100 AM	DATE 4-28-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Morton Texas
(b)(6)		NAME OF AUCTION/MARKET
CONSIGNOR (OWNER/SHIPPER) NAME Belton Feedlot		CONSIGNEE (RECEIVER/DESTINATION) NAME T.D.A. Pens
STREET ADDRESS 2180 C.R. 120		STREET ADDRESS 10800 Socorro Rd
CITY, STATE, ZIP CODE Morton IL		CITY, STATE, ZIP CODE El Paso, TX
AREA CODE & TELEPHONE NO. (806) 525-4221		AREA CODE & TELEPHONE NO. (915) 859-3942

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

<input checked="" type="checkbox"/> Pregnant mares are not likely to foal (give birth) during the trip.	<input checked="" type="checkbox"/> Horses are able to bear weight on all 4 limbs.
<input checked="" type="checkbox"/> Foals are older than 6 months of age.	<input checked="" type="checkbox"/> Horses are not blind in both eyes.
	<input checked="" type="checkbox"/> 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	USGT 7977					✓						✓			✓	At 214	091914
2	7978	✓										✓	✓				105590
3	7979						Roan					✓	✓				084150
4	7980					✓						✓			✓		092937
5	7981			✓								✓	✓				082106
6	7982	✓										✓	✓				060053
7	7983					✓						✓	✓				042714
8	7984					✓						✓	✓				099038
9	7985					✓						✓			✓		103390
10	7986						BRN					✓	✓				085044
11	7987	✓										✓			✓		057902
12	7988	✓										✓	✓				096987
13	7989				✓							✓	✓				082862
14	7990					✓						✓			✓		104608
15	USGT 7991	✓										✓	✓			At 214	057033

(b)(6)

FOR A MINIMUM OF 6 CONSECUTIVE

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IFICATION 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)

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

Pen 7

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

711-19141

	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	USGT	7992					✓						✓	✓				✓	056441
17		7993					✓						✓	✓					096801
18		7994	✓										✓	✓					102378
19		7995				✓							✓	✓					082768
20		7996		✓									✓	✓					086384
21		7997	✓										✓	✓					054404
22		7998					✓						✓	✓					040731
23		7999	✓										✓	✓					058942
24		8000	✓										✓			✓			082985
25		8001					✓						✓	✓					104242
26		8002	✓										✓			✓			083148
27		8003						APP					✓	✓					104645
28	USGT	8004						APP					✓	✓				✓	048376
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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)

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

Control Number: 4801B9764

512-383-2411

Office Id: 974801

Beltex Corporation

Po Box 427

Service Date(s)

Whiteface TX 79379

Begin: 28-APR-11

End: 28-APR-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 # T1119140, 9141

Payment Information

Nfc Id  
751522503VA

Date	Amount	Payment Type	Account/Check #
02-JUN-11	\$ 104.00	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.

6643



Health Certificate No. 7117 624  
(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 monorchideos.*

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
282059	mare	72months	281908	mare	84months
281977	mare	24months	281949	mare	72months
281940	gelding	36months	281877	mare	60months
281751	gelding	72months	281846	gelding	96months
281910	mare	48months	281911	gelding	84months
281972	mare	48months	281856	gelding	72months
282013	gelding	96months	281912	mare	48months
282163	gelding	72months	282156	mare	120months

Mexico, Slaughter horse HC

4/28/11



CCB



Health Certificate No. 7117-624  
(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
281750	mare	84months	077344	mare	72months
281862	mare	48months	281976	mare	84months
281902	mare	60months	281853	gelding	84months
281992	gelding	24months	281871	mare	60months
282027	mare	72months	281851	mare	48months
281931	mare	72months	076615	mare	24months
281810	gelding	96months	098842	mare	84months
077650	gelding	120months	103922	gelding	96months
104827	gelding	108months	056839	mare	72months
092660	gelding	84months			
Total: 35hd					



Health Certificate No. 7117624  
(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**

- 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 April 27, 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. 7117624 *AMB*  
 (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 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-1994)]*

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)



4-27-11  
 Signature of Accredited Veterinarian and Date

*Firma del Médico Veterinario Acreditado  
 y Fecha*

(b)(6)



4-28-11  
 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*).

cu. 13

AFFIDAVIT  
DECLARACIÓN JURADA

I (print) <sup>(b)(6)</sup> [redacted] Betex Corp declare that the horses included in this shipment and accompanied by the health certificate number TL17624 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 TL17624 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*

<sup>(b)(6)</sup> [redacted]

4/27/2011

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

<sup>(b)(6)</sup> [redacted]

4/27/2011





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

71117624

TIME HORSES LOADED ON CONVEYANCE

DATE

7:30 a.m. 7-28-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Morton Texas

PEN 23

NO 30

(b)(6)

Betty Feedlot

2180 CD/20

Morton Texas 79346

AREA CODE & TELEPHONE NO.  
(806) 525-4221

CONSIGNEE (RECEIVER/DESTINATION) NAME

Breaux Cattle Co

STREET ADDRESS

Cattle Drive

CITY, STATE, ZIP CODE

Presidio Texas

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	7937					✓						✓	✓			Art. hip	282059
2	7938		✓									✓	✓				281908
3	7939					✓						✓	✓				281977
4	7940	✓										✓	✓				281949
5	7941	✓										✓			✓		281940
6	7942					✓						✓	✓				281877
7	7943					✓						✓			✓		281751
8	7944					✓						✓			✓		281846
9	7945		✓									✓	✓				281910
10	7946					✓						✓			✓		281911
11	7947					✓						✓	✓				281972
12	7948					✓						✓			✓		281856
13	7949					✓						✓			✓		282013
14	7950	✓										✓	✓				281912
15	7951			✓								✓			✓	Art. hip	282163

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 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)

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

VS F (b)(6) editions are obsolete

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN  
FRONTERAS (DGIF)

EST.

DATE

TIME

**OWNER/SHIPPER CERTIFICATE  
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

71117624

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			
05BT	7952					✓						✓	✓					282156
	7954	✓										✓	✓					281750
	7955											✓	✓					077344
	7956											✓	✓					281862
	7957				✓							✓	✓					281976
	7958				✓							✓	✓					281902
	7959					✓						✓			✓			281853
	7960	✓										✓			✓			281992
	7961			✓								✓	✓					281871
	7962											✓	✓					282027
	7963											✓	✓					281851
	7964											✓	✓					281931
	7965				✓							✓	✓					076615
	7966											✓			✓			281810
	7971					✓						✓	✓					098842
	7972					✓						✓			✓			077650
	7973				✓							✓			✓			103922
	7974	✓										✓			✓			104827
05BT	7975					✓						✓	✓					056839
	7976					✓						✓			✓			092660

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

(b)(6)

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

my knowledge.)  
Gail  
2056490

**PRESIDIO PORT / HORSE EXPORT**

**Name and Address of Remitter:**

**Beltex Corporation  
2180 CR 120  
Morton, Texas 79346**

**Service Date**

**Begin:4-28-11**

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	
1	HCT 1117624	\$52.00	(35hd) 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>
4/28/2011	\$52.00	On Account	751522503VA
		Check	
		CASH	
		Money Order	
		Credit Card	

4801B 8435

UNITED STATES DEPARTMENT OF AGRICULTURE  
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: 4801B8435

Office Id: 974801

Service Date(s)

Begin: 28-APR-11

End: 28-APR-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 # T1117624

Payment Information

Nfc Id  
751522503VA

Date	Amount	Payment Type	Account/Check #
03-MAY-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.



**AFFIDAVIT  
DECLARACIÓN JURADA**

I (print) <sup>(b)(6)</sup> [REDACTED] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 711-19137 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 711-19137 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 thirosthaties 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*

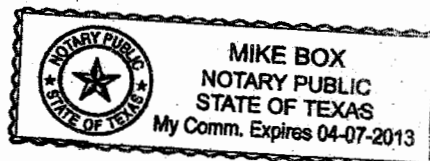
<sup>(b)(6)</sup> [REDACTED]

4/25/2011

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

<sup>(b)(6)</sup> [REDACTED]

4/25/2011



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

7/11-19/37

DATE

11-22-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Morton Texas

NAME OF AUCTION/MARKET

CONSIGNEE (RECEIVER/DESTINATION) NAME

TDA Pens

STREET ADDRESS

10800 Socorro Rd

CITY, STATE, ZIP CODE

El Paso Texas

AREA CODE & TELEPHONE NO

(915) 859-3942

CONSIGNOR (OWNER/SHIPPER) NAME

Betty feedlot

STREET ADDRESS

2180 CR 120

CITY, STATE, ZIP CODE

Morton Texas 79346

AREA CODE & TELEPHONE NO

(806) 525-4221

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 Tattoo, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	7600	✓										✓				✓	085394
2	7601	✓										✓				✓	085001
3	7602	✓										✓	✓				084431
4	7603	✓										✓	✓				100418
5	7604	✓										✓			✓		095725
6	7606	✓										✓			✓		087573
7	7607	✓										✓	✓				085750
8	7608	✓					✓					✓			✓		091773
9	7610	✓										✓			✓		088032
10	7611	✓										✓			✓		053351
11	7612	✓					✓ Alb					✓	✓				089831
12	7613	✓					✓					✓	✓				099094
13	7615	✓										✓	✓				086248
14	7616	✓										✓	✓				098904
15	7617	✓										✓	✓			✓	086271

HORSES  
HOURS

SIGNATURE

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 THE PERSON WHOSE HORSES ARE BEING TRANSPORTED: This form is true and correct to

VS: (b)(6) Conditions are obsolete

PART 1: INSPECTOR

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN  
FRONTERAS (DGIF)

EST.

DATE

TIME

PAGE 1 OF 2



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 0579-0180. 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.  
0579-0180

711-19137

**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	EST	71618		✓									✓	✓					Art hip	085094
17		71619					✓						✓	✓						087508
18		71620			✓								✓			✓				096558
19		71621					✓						✓	✓						090763
20		71622					✓						✓	✓						098991
21		71623					✓						✓	✓						100299
22		71625	✓										✓			✓				050173
23		71626					✓						✓				✓			056936
24		71627	✓										✓				✓			088790
25		71628				✓							✓	✓						303046
26		71630					✓						✓	✓						083767
27		71631	✓										✓	✓						082241
28		71632	✓										✓				✓			055709
29		71633	✓										✓				✓			061425
30		71634											✓	✓						058717
31		71636					Dun						✓	✓						076895
32		71637					BW						✓	✓						083665
33		71639					Dun						✓	✓						080104
34		71640					Roan						✓				✓			054766
35		71641	✓										✓				✓			098023
36		71642	✓										✓	✓						106210
37		71643				✓							✓				✓			092264
38		71644					Black						✓	✓						076646
39		71646	✓										✓				✓			308861
40		71647	✓										✓				✓			096665
41		71648					Black						✓	✓						095989
42	EST	71649					App						✓				✓	Art hip		083499
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 (48 U.S.C. SECTION 1001).

(b)(6)

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



Health Certificate No. 711-19138  
(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  
3801 N Grove  
*Nombre y Dirección del Exportador:* Fort Worth, Texas 76106
2. 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
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
281971	mare	120months	281935	gelding	120months
281985	mare	24months	282109	gelding	144months
281816	mare	180months	282019	mare	180months
281154	gelding	120months	598422	gelding	96months
608961	mare	48months	608955	mare	60months
608260	gelding	84months	579315	gelding	72months
608443	mare	84months	608438	gelding	120months
643304	mare	36months	587226	mare	108months

Mexico, Slaughter horse HC





Health Certificate No. T/1-19138  
 (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
280228	gelding	132months	280552	mare	36months
280503	mare	48months	280510	mare	120months
280574	mare	120months	280501	mare	120months
280624	mare	108months	280289	mare	96months
280620	mare	96months	280531	mare	60months
280585	mare	96months	062810	mare	48months
280506	mare	60months	280584	mare	108months
280603	mare	84months	280504	mare	132months
041880	mare	108months			
Total: 33hd					

Mexico, Slaughter house HC



Health Certificate No. T11-19138  
 (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 April 25, 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.*

Mexico, Slaughter horse HC



Health Certificate No. 711-19138  
 (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 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)]*

GRANT WEASE DVM  
 USDA, APHIS, VETERINARY SVCS.  
 EL PASO, TEXAS

Chris Larson, D.V.M.

Name of Accredited Veterinarian  
*Nombre del Médico Veterinario  
 Acreditado*

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

(b)(6)

4-25-11

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

(b)(6)

4/27/11

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) Abel tex Corp declare that the horses included in this shipment and accompanied by the health certificate number T/1-19138 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 T/1-19138 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*

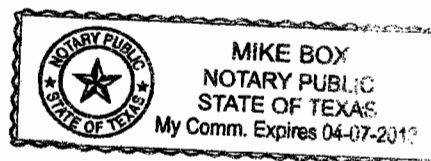
(b)(6)

4/25/2011

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

(b)(6)

4/25/2011





Pen 7

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  
771-19138

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

CONSIGNEE (RECEIVER/DESTINATION) NAME

STREET ADDRESS

STREET ADDRESS

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

AREA CODE & TELEPHONE NO.

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	USGT	7787		✓									✓	✓			ART	281971
2		7788	✓										✓			✓		281935
3		7789					✓						✓	✓				281985
4		7790		✓							✓					✓		282109
5		7791			✓								✓	✓				281816
6		7792					✓						✓	✓				282019
7		7793	✓										✓			✓		281154
8		7795						DUN					✓			✓		598422
9		7796		✓									✓	✓				608961
10		7797	✓										✓	✓				608955
11		7798					✓						✓			✓		608260
12		7799	✓										✓			✓		579315
13		7800					✓						✓	✓				608443
14		7801					✓						✓			✓		608438
15	USGT	7802						APP					✓	✓			ART	643304

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

HOURS

SIGN

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COM

USIN

\$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGN

the b

THE INFORMATION IN IT AS  
THIS FORM OR KNOWINGLY  
A FINE OF NOT MORE THAN

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

VS F

ditions are obsolete

INSPECTOR

PAGE 1 OF 2

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

Pen 7  
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  
T11-19138

	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	USGT	7803					✓						✓	✓			At Tag	587226
17		7805						APP					✓			✓		280 228
18		7806						AL					✓	✓				280 552
19		7807					✓						✓	✓				280 503
20		7809						ROAN					✓	✓				280 510
21		7810						DUN					✓	✓				280 574
22		7811						AL					✓	✓				280 501
23		7812		✓									✓	✓				280 624
24		7813						ROAN					✓	✓				280 289
25		7814					✓						✓	✓				280 620
26		7815		✓									✓	✓				280 531
27		7816		✓									✓	✓				280 585
28		7817						BRN					MULE	✓				062810
29		7818						DUN					✓	✓				280 506
30		7820					✓						✓	✓				280 584
31		7822						ROAN					✓	✓				280 603
32		7823						BRN					✓	✓				280 504
33	USGT	7824	✓										✓	✓			At Tag	041880
34																		
35																		
36																		
37																		
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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)

VS  
(S)

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



Health Certificate No. 711-19139  
(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 monorchideos.*

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  
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
057917	mare	84months	091278	mare	96months
060634	mare	96months	054525	mare	120months
043541	gelding	84months	094236	mare	120months
102422	gelding	96months	040174	gelding	144months
099937	gelding	132months	042528	gelding	156months
061544	mare	72months	056921	mare	84months
055462	mare	144months	060731	gelding	120months
062099	gelding	72months	077497	gelding	96months

Mexico, Slaughter horse HC



Health Certificate No. 711-19139  
(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
078599	mare	72months	080301	mare	132months
084926	mare	120months	046368	mare	108months
058746	gelding	180months	056152	gelding	120months
055910	mare	120months	095389	mare	96months
047967	mare	108months	105555	gelding	96months
093919	gelding	96months	104432	gelding	132months
054961	mare	48months	095349	mare	96months
081554	gelding	120months	085958	mare	96months
total: 32hd					

Mexico, Slaughter horse HC





page 3 of 4  
Health Certificate No. 711-19139  
(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 April 26, 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.*



(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.]

GRANT WEASE DVM  
USDA, APHIS, VETERINARY SVCS.  
EL PASO, TEXAS

Chris Larson D.V.M.

Name of Accredited Veterinarian  
*Nombre del Médico Veterinario  
Acreditado*

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

(b)(6)

(b)(6)

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.*)

Mexico, Slaughter horse HC

AFFIDAVIT  
DECLARACIÓN JURADA

I (print (b)(6) Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 711-19139 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 711-19139 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*

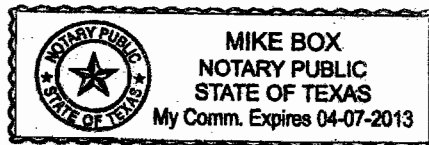
(b)(6)

4/26/2011

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

(b)(6)

4/26/2011



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

Pen 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

TTI-19139

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNEE (OWNER/SHIPPER) NAME

CONSIGNEE (RECEIVER/DESTINATION) NAME

STREET ADDRESS

STREET ADDRESS

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

AREA CODE & TELEPHONE NO.

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	7844					✓						✓	✓			Dist	057917
2	7845					✓						✓	✓				091278
3	7846	✓										✓	✓				060634
4	7848			✓								✓	✓				051525
5	7850					✓						✓			✓		043541
6	7851					✓						✓	✓				094236
7	7852					✓						✓			✓		102422
8	7853						BRN					✓			✓		040174
9	7854						APP					✓			✓		099937
10	7856	✓										✓			✓		042528
11	7857			✓								✓	✓				061544
12	7858					✓						✓	✓				056921
13	7859					✓						✓	✓				055462
14	7861	✓										✓			✓		060731
15	7863	✓										✓			✓	Dist	062099

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

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

SIGNATURE

I HEREBY  
COMPLETE  
USING A  
\$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

THE INFORMATION IN IT AS  
THIS FORM OR KNOWINGLY  
A FINE OF NOT MORE THAN

DIRECCION GENERAL DE INSPECCION EN  
FRONTERAS (DGIF)

EST.

DATE

TIME

(b)(6)  
Signed in this form is true and correct to

VS

previous editions are obsolete

PAGE 1 OF

T 1 - INSPECTOR



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

711-19139

	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	65T	7866	✓										✓			✓	Art	077497	
17		7868					BRN						✓	✓				078599	
18		7870				✓							✓	✓				080301	
19		7874					✓						✓	✓				084926	
20		7875						APP					✓	✓				046368	
21		7876					✓						✓			✓		058746	
22		7877	✓										✓			✓		056152	
23		7878			✓								✓	✓				055910	
24		7879				✓							✓	✓				095389	
25		7881	✓										✓	✓				047967	
26		7882						Pal					✓			✓		105555	
27		7883						Roan					✓			✓		093919	
28		7884											✓			✓		104432	
29		7885		✓									✓	✓				054961	
30		7890	✓										✓	✓				095349	
31		7891						BRN					✓			✓		081554	
32	65T	7894		✓									✓	✓			Art	085958	
33																			
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I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

(b)(6) contained in this form is true and

ANIMAL AND PLANT HEALTH INSPECTION SERVICES  
STATEMENT OF SERVICES

Originating Office Phone

Control Number: 4801B9763

512-383-2411

Office Id: 974801

Beltex Corporation

Po Box 427

Service Date(s)

Whiteface

TX 79379

Begin: 27-APR-11

End: 27-APR-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	3.00	156.00

Total Due \$ 156.00

Remarks: Health Certificate # T1119137, 9138, 9139

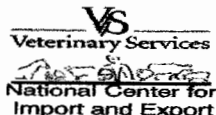
Payment Information

Nfc Id  
751522503VA

Date	Amount	Payment Type	Account/Check #
02-JUN-11	\$ 156.00	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. **711-19136**  
(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

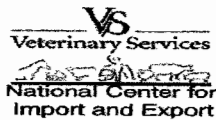
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

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>
985170001041503 USDA4751	Female	96 months	985170001092933 USDA4739	Female	24 months
985170001040589 USDA4752	Female	120 months	985170001103094 USDA4760	Female	108 months
985170001094728 USDA4753	Female	96 months	985170001044104 USDA4761	Female	144 months
985170001083036 USDA4754	Female	84 months	985170001056871 USDA4762	Gelding	180 months
985170001103251 USDA4755	Gelding	120 months	985170001091994 USFU4763	Female	12 months
985170001056050 USFU4756	Female	60 months	985170001056006 USFU4764	Female	18 months
985170001103556 USFU4757	Female	24 months	985170001099050 USFU4765	Female	84 months
985170001049494 USFU4758	Female	60 months	985170001099066 USFU4766	Female	144 months

Mexico Slaughter horses HC

480139702

4/27/11



Health Certificate No. **711-19136**  
(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
985170001104136 USFU4767	Female	72 months	985170001105435 USFU4774	Female	48 months
985170001095500 USFU4768	Female	120 months	985170001058687 USFU4775	Female	24 months
985170001081841 USFU4769	Gelding	180 months	985170001103184 USFU4776	Gelding	48 months
985170001083055 USFU4770	Female	132 months	985170001103128 USFU4777	Female	48 months
985170001105565 USFU4771	Gelding	60 months	985170001045651 USFU4778	Female	24 months
985170001086830 USFU4772	Female	48 months	985170001058667 USFU4779	Female	36 months
985170001098727 USFU4773	Female	120 months	985170001103325 USFU4780	Gelding	24 months





Health Certificate No. 711-19136  
(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 04/26/2011

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. 711-19136  
(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 pp ticks.]

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

GRANT WEASE DVM  
USDA, APHIS, VETERINARY SVCS.  
EL PASO, TEXAS

CRYSTAL VAN LOM

Name of Accredited Veterinarian  
Nombre del Médico Veterinario  
Acreditado

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

(b)(6)

[Redacted signature area]

4/26/11  
and Date

Firma del Médico Veterinario Acreditado  
y Fecha

(b)(6)

[Redacted signature area]

and Date

Firma del Médico Veterinario que endosa  
y Fecha

4/27/11

(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

**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

711-19136

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <i>El Paso, TX</i>
VEHICLE LICENSE NO. AND DRIVER'S NAME	NAME OF AUCTION/MARKET <i>Rio Grand Classic 4/5</i>	
CONSIGNOR (OWNER/SHIPPER) NAME <i>Rio Grand Classic 4/5 Auction</i>	CONSIGNEE (RECEIVER/DESTINATION) NAME <i>Empacadora y Ganadera de Camargo</i>	
STREET ADDRESS <i>11870 Gateway East</i>	STREET ADDRESS <i>Carretera Pan Americana KM 64</i>	
CITY, STATE, ZIP CODE <i>El Paso TX 79927</i>	CITY, STATE, ZIP CODE <i>El Camargo, Chihuahua, Mex 33750</i>	
AREA CODE & TELEPHONE NO. <i>915 858 0590</i>	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	USFU	4751	X							X				X				98517001 041503
2	USFU	4752		X						X				X				98517001 040589
3	USFU	4753						Brn					Mule	X				98517001 094728
4	USFU	4754						Dun		X				X				98517001 083036
5	USFU	4755		X									Mule			X		98517001 103251
6	USFU	4756					X			X				X				98517001 056050
7	USFU	4757					X			X				X				98517001 103556
8	USFU	4758					X			X				X				98517001 049494
9	USFU	4759					X			X				X				98517001 092933
10	USFU	4760					X			X				X				98517001 103094
11	USFU	4761					X			X				X				98517001 044104
12	USFU	4762						Brn	X							X		98517001 056871
13	USFU	4763	X							X				X				98517001 091994
14	USFU	4764						Brn		X				X				98517001 056006
15	USFU	4765						Dun		X				X				98517001 099050

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

SIGNATURE

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

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

**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

771-19136

	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	4766		X										X					985170001 099066
17	USFU	4767	X							X				X					985170001 104136
18	USFU	4768	X											X					985170001 095500
19	USFU	4769					X			X						X			985170001 081841
20	USFU	4770						Brn		X				X					985170001 083055
21	USFU	4771					X			X						X			985170001 105585
22	USFU	4772					X			X				X					985170001 086830
23	USFU	4773						Brn		X				X					985170001 098727
24	USFU	4774			X								Paint	X					985170001 105435
25	USFU	4775	X							X				X					985170001 058687
26	USFU	4776	X							X						X			985170001 103184
27	USFU	4777						White			X			X					985170001 103128
28	USFU	4778						Brn		X				X					985170001 045651
29	USFU	4779	X							X				X					985170001 058667
30	USFU	4780			X								Paint			X			985170001 103325
31																			
32																			
33																			
34																			
35																			
36																			
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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)

20229

**LIVESTOCK ACCOUNT**

858-0590  
11870 GATEWAY EAST  
EL PASO, TX 79927

DATE 4-27-11

35-1054/1130  
17329

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

\$ 52.00

Gift from Dad & Mom

DOLLARS

**BBVA Compass**

Compass Bank  
El Paso, TX

(b)(6)

FOR Vet

(b)(4)

**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>
985170001041503 USDA4751	Female	96 months	985170001092933 USDA4739	Female	24 months
985170001040589 USDA4752	Female	120 months	985170001103094 USDA4760	Female	108 months
985170001094728 USDA4753	Female	96 months	985170001044104 USDA4761	Female	144 months
985170001083036 USDA4754	Female	84 months	985170001056871 USDA4762	Gelding	180 months
985170001103251 USDA4755	Gelding	120 months	985170001091994 USFU4763	Female	12 months
985170001056050 USFU4756	Female	60 months	985170001056006 USFU4764	Female	18 months
985170001103556 USFU4757	Female	24 months	985170001099050 USFU4765	Female	84 months
985170001049494 USFU4758	Female	60 months	985170001099066 USFU4766	Female	144 months

Mexico Slaughter horses HC

480139702

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

Originating Office Phone

512-383-2411

Rio Grand Classic Livestock

11870 Gateway East

El Paso TX 79927

Control Number: 4801B9702

Office Id: 974801

Service Date(s)

Begin: 27-APR-11

End: 27-APR-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 # T 1119136

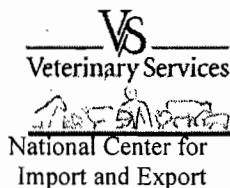
Payment Information

Nfc Id  
9999999999V

Date	Amount	Payment Type	Account/Check #
01-JUN-11	\$ 52.00	Check	20229

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.



cup  
Health Certificate No. 7117 615  
(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: **Double JJ Horse**  
*Nombre y Dirección del Exportador:* **2621 W 116th St**  
**Perkins, OK. 74059**
2. Name and Address of Importer: **Inter Meats, S.A. DE C.V.**  
*Nombre y Dirección del Importador:* **Av. Universidad No. 602 Int.19**  
**Aguascalientes, AGS. CP 20130**
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 5001 985170001025968	GELDING	60 MONTHS	USHB 5002 985170000960368	GELDING	84 MONTHS
USHB 5003 985170000949343	GELDING	96 MONTHS	USHB 5004 985170000936346	GELDING	36 MONTHS
USHB 5005 985170000980420	MARE	72 MONTHS	USHB 5006 985170000979866	MARE	84 MONTHS
USHB 5007 985170000937997	MARE	132 MONTHS	USHB 5008 985170000949968	MARE	48 MONTHS
USHB 5009 985170000972965	MARE	84 MONTHS	USHB 5010 985170000954738	MARE	144 MONTHS
USHB 5011 985170001047829	MARE	36 MONTHS	USHB 5012 985170001047105	MARE	72 MONTHS
USHB 5013 985170001017542	MARE	108 MONTHS	USHB 5014 985170000996002	MARE	120 MONTHS
USHB 5015 985170000983270	MARE	96 MONTHS	USHB 5016 985170000971606	GELDING	120 MONTHS



Health Certificate No. 71117615  
(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 5017 985170000919219	GELDING	72 MONTHS	USHB 5018 985170000954982	GELDING	60 MONTHS
USHB 5019 985170001003450	GELDING	48 MONTHS	USHB 5020 985170000935865	GELDING	72 MONTHS
USHB 5021 985170001104901	GELDING	132 MONTHS	USHB 5022 985170001057330	GELDING	84 MONTHS
USHB 5023 985170001057175	GELDING	96 MONTHS	USHB 5024 985170001058062	GELDING	120 MONTHS
USHB 5025 985170001093986	GELDING	144 MONTHS	USHB 5026 985170001097966	MARE	60 MONTHS
USHB 5027 985170001104614	MARE	24 MONTHS	USHB 5028 985170001093400	MARE	108 MONTHS
USHB 5029 985170001098412	MARE	96 MONTHS	USHB 5030 985170001093032	GELDING	48 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 04/24/2011

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.*





VS  
Veterinary Services  
National Center for  
Import and Export

Health Certificate No. 7417615  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

CCF

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 JAGEN D.V.M.

Name of Accredited Veterinarian

*Nombre del Medico Veterinario*

*Acreditado*

WH BROWN DVM

Name of Endorsing Federal Veterinarian

*Nombre del Medico Veterinario*

*Federal que endosa.*

(b)(6)

04/24/11

Signature of Accredited Veterinarian and Date

*Firma del Medico Veterinario Acreditado*

*Y Fecha*

(b)(6)

4.27-11

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).

CENB



AFFIDAVIT  
DECLARACIÓN JURADA

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number 71117615 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 71117615 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*

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  
7117615

TIME HORSES LOADED ON CONVEYANCE  
05:30 p.m.

DATE  
04/24/2011

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

(b)(6)

NAME OF AUCTION/MARKET  
Perkins Ranch

CONSIGNOR (OWNER/SHIPPER) NAME  
Double JJ Horse Co

CONSIGNEE (RECEIVER/DESTINATION) NAME  
Inter Meats S.A. de C.V.

STREET ADDRESS

STREET ADDRESS

2621 W 116<sup>th</sup> Street

Av. Universidad No. 602 Int. 19

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

Perkins, OK.

Aguascalientes, Ags. C.P. 20130

AREA CODE & TELEPHONE NO.

AREA CODE & TELEPHONE NO.

405 547 8337

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	5001					X			X						X	60 MONTHS	985170001025968
2	USHB	5002					X			X						X	84 MONTHS	985170000960368
3	USHB	5003					X			X						X	96 MONTHS	985170000949343
4	USHB	5004					X			X						X	36 MONTHS	985170000936346
5	USHB	5005					X			X				X			72 MONTHS	985170000980420
6	USHB	5006					X			X				X			84 MONTHS	985170000979866
7	USHB	5007					X			X				X			132 MONTHS	985170000937997
8	USHB	5008					X			X				X			48 MONTHS	985170000949968
9	USHB	5009					X			X				X			84 MONTHS	985170000972965
10	USHB	5010					X			X				X			144 MONTHS	985170000954738
11	USHB	5011						X		X				X			36 MONTHS	985170001047829
12	USHB	5012						X		X				X			72 MONTHS	985170001047105
13	USHB	5013						X		X				X			108 MONTHS	985170001017542
14	USHB	5014						X		X				X			120 MONTHS	985170000996002
15	USHB	5015						X		X				X			96 MONTHS	985170000983270

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

SIGNATURE

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

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

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

711765

	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	5016						X		X						X	120 MONTHS	985170000971606
17	USHB	5017						X		X						X	72 MONTHS	985170000919219
18	USHB	5018				X				X						X	60 MONTHS	985170000954982
19	USHB	5019			X					X						X	48 MONTHS	985170001003450
20	USHB	5020	X							X						X	72 MONTHS	985170000935865
21	USHB	5021	X							X						X	132 MONTHS	985170001104901
22	USHB	5022	X							X						X	84 MONTHS	985170001057330
23	USHB	5023	X							X						X	96 MONTHS	985170001057175
24	USHB	5024	X							X						X	120 MONTHS	985170001058062
25	USHB	5025	X							X						X	144 MONTHS	985170001093986
26	USHB	5026	X							X				X			60 MONTHS	985170001097966
27	USHB	5027	X							X				X			24 MONTHS	985170001104614
28	USHB	5028	X							X				X			108 MONTHS	985170001093400
29	USHB	5029	X							X				X			96 MONTHS	985170001098412
30	USHB	5030						X			X					X	48 MONTHS	985170001093032
31																		
32																		
33																		
34																		
35																		
36																		
37																		
38																		
39																		
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43																		
44																		
45																		

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

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





Health Certificate No. TL117617  
(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: **Double JJ Horse Co**  
*Nombre y Dirección del Exportador:* **2621 W 116th St**  
**Perkins, OK. 74059**
2. Name and Address of Importer: **Inter Meats, S.A. DE C.V.**  
*Nombre y Dirección del Importador:* **Av. Universidad No. 602 Int.19**  
**Aguascalientes, AGS. CP 20130**
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
USFS 5251 981020005350903	MARE	60 MONTHS	USFS 5252 981020005334525	MARE	84 MONTHS
USFS 5253 981020005341468	MARE	96 MONTHS	USFS 5254 981020005336447	MARE	36 MONTHS
USFS 5255 981020005332556	MARE	72 MONTHS	USFS 5256 981020005359675	GELDING	84 MONTHS
USFS 5257 981020005348768	GELDING	132 MONTHS	USFS 5258 981020005334399	GELDING	48 MONTHS
USFS 5259 981020005353396	GELDING	84 MONTHS	USFS 5260 981020005351956	GELDING	144 MONTHS
USFS 5261 981020005344369	MARE	36 MONTHS	USFS 5262 981020005341073	MARE	72 MONTHS
USFS 5263 981020005353829	MARE	108 MONTHS	USFS 5264 981020005335234	GELDING	120 MONTHS
USFS 5265 981020005342260	GELDING	96 MONTHS	USFS 5266 981020005352263	GELDING	120 MONTHS



Vs  
Veterinary Services

National Center for  
Import and Export

Health Certificate No. 71117617  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

Microchip number / Numero de Microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip number / Numero de Microchip	Sex/Sexo	Approximate age/Edad aproximada
USFS 5267 981020005352789	GELDING	72 MONTHS	USFS 5268 981020005333076	MARE	60 MONTHS
USFS 5269 981020005341746	MARE	48 MONTHS	USFS 5270 981020005335421	GELDING	72 MONTHS
USFS 5271 981020005336486	MARE	132 MONTHS	USFS 5272 981020005343559	MARE	84 MONTHS
USFS 5273 981020005358083	MARE	96 MONTHS	USFS 5274 981020005359163	MARE	120 MONTHS
USFS 5275 981020005347160	MARE	144 MONTHS	USFS 5276 981020005334151	MARE	60 MONTHS
USFS 5277 981020005351130	MARE	24 MONTHS	USFS 5278 981020005334441	GELDING	108 MONTHS
USFS 5279 981020005332526	GELDING	96 MONTHS	USFS 5280 981020005332689	GELDING	48 MONTHS
USFS 5281 981020005335417	GELDING	23 MONTHS	USFS 5282 981020005350522	MARE	96 MONTHS
USFS 5283 981020005357090	MARE	72 MONTHS	USFS 5284 981020005327799	GELDING	24 MONTHS
USFS 5285 981020005354884	GELDING	108 MONTHS	USFS 5286 981020005338030	MARE	96 MONTHS
USFS 5287 981020005348669	GELDING	48 MONTHS	USFS 5288 981020005349485	MARE	23 MONTHS
USFS 5289 981020005348087	GELDING	96 MONTHS	USFS 5290 981020005340245	MARE	72 MONTHS



Health Certificate No. 71122617  
(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 04/19/2011

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.*

CatB



VS  
Veterinary Services  
National Center for  
Import and Export

Health Certificate No. 71112617  
(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 JAGEN D.V.M.

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)

4/19/11

Signature of Accredited Veterinarian and Date

*Firma del Medico Veterinario Acreditado*

*Y Fecha*

(b)(6)

4-27-11

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**

cub3

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number TL117617 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 TL117617 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*

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

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

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

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FORM  
APPROVED  
OMB NO.  
0579-0160  
T1117617

TIME HORSES LOADED ON CONVEYANCE  
02:30 p.m.

DATE  
04/19/2011

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

(b)(6)

NAME OF AUCTION/MARKET  
Perkins Ranch

CONSIGNOR (OWNER/SHIPPER) NAME  
Double JJ Horse Co

CONSIGNEE (RECEIVER/DESTINATION) NAME  
Inter Meats S.A. de C.V.

STREET ADDRESS  
2621 W 116th Street

STREET ADDRESS  
Av. Universidad No. 602 Int. 19

CITY, STATE, ZIP CODE  
Perkins, OK.

CITY, STATE, ZIP CODE  
Aguascalientes, Ags. C.P. 20130

AREA CODE & TELEPHONE NO.  
405 547 8337

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	USFS	5251	X							X				X			60 MONTHS	981020005350903
2	USFS	5252	X							X				X			84 MONTHS	981020005334525
3	USFS	5253	X							X				X			96 MONTHS	981020005341468
4	USFS	5254	X							X				X			36 MONTHS	981020005336447
5	USFS	5255	X							X				X			72 MONTHS	981020005332556
6	USFS	5256	X							X						X	84 MONTHS	981020005359675
7	USFS	5257	X							X						X	132 MONTHS	981020005348768
8	USFS	5258	X							X						X	48 MONTHS	981020005334399
9	USFS	5259	X							X						X	84 MONTHS	981020005353396
10	USFS	5260	X							X						X	144 MONTHS	981020005351956
11	USFS	5261			X					X				X			36 MONTHS	981020005344369
12	USFS	5262			X					X				X			72 MONTHS	981020005341073
13	USFS	5263			X					X				X			108 MONTHS	981020005353829
14	USFS	5264			X					X						X	120 MONTHS	981020005335234
15	USFS	5265			X					X						X	96 MONTHS	981020005342260

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

SIGNATURE

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

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

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.  
DATE  
TIME

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST.  
DATE  
TIME

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

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FORM  
APPROVED  
OMB NO.  
0579-0160

7117617

	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	USFS	5266			X					X						X	120 MONTHS	981020005352263
17	USFS	5267			X					X						X	72 MONTHS	981020005352789
18	USFS	5268				X				X				X			60 MONTHS	981020005333076
19	USFS	5269				X				X				X			48 MONTHS	981020005341746
20	USFS	5270				X				X						X	72 MONTHS	981020005335421
21	USFS	5271					X			X				X			132 MONTHS	981020005336486
22	USFS	5272					X			X				X			84 MONTHS	981020005343559
23	USFS	5273					X			X				X			96 MONTHS	981020005358083
24	USFS	5274					X			X				X			120 MONTHS	981020005359163
25	USFS	5275					X			X				X			144 MONTHS	981020005347160
26	USFS	5276					X			X				X			60 MONTHS	981020005334151
27	USFS	5277					X			X				X			24 MONTHS	981020005351130
28	USFS	5278					X			X						X	108 MONTHS	981020005334441
29	USFS	5279					X			X						X	96 MONTHS	981020005332526
30	USFS	5280					X			X						X	48 MONTHS	981020005332689
31	USFS	5281					X			X						X	23 MONTHS	981020005335417
32	USFS	5282						X		X				X			96 MONTHS	981020005350522
33	USFS	5283						X					X	X			72 MONTHS	981020005357090
34	USFS	5284						X		X						X	24 MONTHS	981020005327799
35	USFS	5285						X		X						X	108 MONTHS	981020005354884
36	USFS	5286	X							X				X			96 MONTHS	981020005338030
37	USFS	5287	X							X						X	48 MONTHS	981020005348669
38	USFS	5288					X			X				X			23 MONTHS	981020005349485
39	USFS	5289					X			X						X	96 MONTHS	981020005348087
40	USFS	5290						X		X				X			72 MONTHS	981020005340245
41																		
42																		
43																		
44																		
45																		

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



Health Certificate No. 1117618  
(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 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 1<sup>st</sup> 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.**

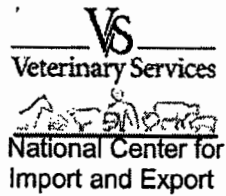
Microchip number/ Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip number/ Número de microchip	Sex/Sexo	Approximate age/Edad aproximada
981020005336935 USGW 4451	Mare	96 Months	981020005343458 USGW 4459	Gelding	60 Months
981020005349764 USGW 4452	Mare	108 Months	981020005348219 USGW 4460	Gelding	24 Months
981020005352326 USGW 4453	Mare	48 Months	981020005355355 USGW 4461	Mare	60 Months
981020005332010 USGW 4454	Mare	96 Months	981020005331483 USGW 4462	Mare	144 Months
981020005349889 USGW 4455	Mare	132 Months	981020005340597 USGW 4463	Mare	96 Months
981020005341699 USGW 4456	Gelding	48 Months	981020005355575 USGW 4464	Gelding	84 Months
981020005345856 USGW 4457	Gelding	72 Months	981020005332989 USGW 4465	Gelding	108 Months
981020005333423 USGW 4458	Gelding	36 Months	981020005348902 USGW 4466	Gelding	72 Months

Mexico, Slaughter horse HC

PG 1

Bww

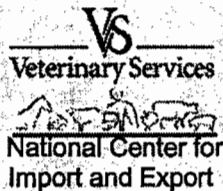




Health Certificate No. 74117618  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

Microchip number/ <i>Número de microchip</i>	Sex/Sexo	Approximate age/Edad aproximada	Microchip number/ <i>Número de microchip</i>	Sex/Sexo	Approximate age/Edad aproximada
981020005346794 USGW 4467	Gelding	24 Months	981020005334643 USGW 4485	Gelding	108 Months
981020005356374 USGW 4468	Mare	48 Months	981020005347221 USGW 4486	Mare	96 Months
981020005334545 USGW 4469	Mare	132 Months	981020005334829 USGW 4487	Gelding	132 Months
981020005350821 USGW 4470	Gelding	36 Months	981020005333285 USGW 4488	Mare	36 Months
981020005353907 USGW 4471	Mare	60 Months	981020005329164 USGW 4489	Gelding	72 Months
981020005339904 USGW 4472	Mare	96 Months	981020005347362 USGW 4490	Mare	84 Months
981020005340570 USGW 4473	Mare	108 Months	XXXXXX	X	X
981020005332759 USGW 4474	Mare	84 Months	XXXXXX	X	X
981020005338585 USGW 4475	Mare	96 Months	XXXXXX	X	X
981020005346252 USGW 4476	Mare	36 Months	XXXXXX	X	X
981020005339561 USGW 4477	Mare	108 Months	XXXXXX	X	X
981020005346308 USGW 4478	Gelding	84 Months	XXXXXX	X	X
981020005345085 USGW 4479	Gelding	24 Months	XXXXXX	X	X
981020005345530 USGW 4480	Gelding	72 Months	XXXXXX	X	X
981020005331118 USGW 4481	Gelding	96 Months	XXXXXX	X	X
981020005339292 USGW 4482	Mare	48 Months	XXXXXX	X	X
981020005358374 USGW 4483	Mare	84 Months	XXXXXX	X	X
981020005332256 USGW 4484	Gelding	24 Months	XXXXXX	X	X

*(Signature)*



Health Certificate No. EL117618 3  
(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 4-25-11

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

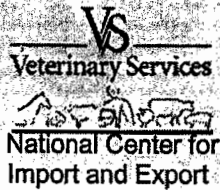
*Los vehículos utilizados para el transporte de los animales a la frontera fueron sometidos a limpieza y desinfección antes del embarque.*

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. TL117618  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

CUB

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.*



Bret W. White, DVM

Name of Accredited Veterinarian  
*Nombre del Médico Veterinario  
Acreditado*

W. BROWN DVM

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

(b)(6)

4-25-11

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

(b)(6)

4-27-11

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).*

BWW

CUB



**AFFIDAVIT  
DECLARACIÓN JURADA**

(b)(6)

I (print) \_\_\_\_\_ declare that the horses included in this shipment and accompanied by the health certificate number 71117618 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 71117618 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.*

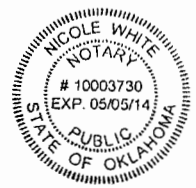
3. The following thirosthaties were not used: thiouracil, methyluracil, phenylthiouracil and propyl \_\_\_\_\_

*Que no fueron empleados los siguientes tiorostáticos: tioracilo, metiluracilo, feniltiuracilo y \_\_\_\_\_*

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

(b)(6)

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

11117618

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

(b)(6)

NAME OF AUCTION/MARKET

Perkins Ranch

CONSIGNEE (RECEIVER/DESTINATION) NAME

Double JJ Horse Co

Alvarado Cattle Co

STREET ADDRESS

2621 W 1<sup>st</sup> 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	4451	X										X	X			96 MONTHS	981020005336935
2	USGW	4452	X							X				X			108 MONTHS	981020005349764
3	USGW	4453	X							X				X			48 MONTHS	981020005352326
4	USGW	4454	X							X				X			96 MONTHS	981020005332010
5	USGW	4455	X							X				X			132 MONTHS	981020005349889
6	USGW	4456	X										X			X	48 MONTHS	981020005341699
7	USGW	4457	X							X						X	72 MONTHS	981020005345856
8	USGW	4458	X							X						X	36 MONTHS	981020005333423
9	USGW	4459	X							X						X	60 MONTHS	981020005343458
10	USGW	4460	X							X						X	24 MONTHS	981020005348219
11	USGW	4461			X								X	X			60 MONTHS	981020005355355
12	USGW	4462			X					X				X			144 MONTHS	981020005331483
13	USGW	4463			X					X				X			96 MONTHS	981020005340597
14	USGW	4464			X								X			X	84 MONTHS	981020005355575
15	USGW	4465			X					X						X	108 MONTHS	981020005332989

(b)(6)

TIVE	<b>CANADIAN FOOD INSPECTION AGENCY (CFIA)</b>
	EST. _____
	DATE _____
IN IT AS OWINGLY RE THAN (01).	TIME _____
	<b>DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)</b>
	EST. _____
irect to	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

7117618

	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	4466			X					X						X	72 MONTHS	981020005348902
17	USGW	4467			X					X						X	24 MONTHS	981020005346794
18	USGW	4468				X				X				X			48 MONTHS	981020005356374
19	USGW	4469				X				X				X			132 MONTHS	981020005334545
20	USGW	4470				X				X						X	36 MONTHS	981020005350821
21	USGW	4471					X			X				X			60 MONTHS	981020005353907
22	USGW	4472					X			X				X			96 MONTHS	981020005339904
23	USGW	4473					X			X				X			108 MONTHS	981020005340570
24	USGW	4474					X			X				X			84 MONTHS	981020005332759
25	USGW	4475					X			X				X			96 MONTHS	981020005338585
26	USGW	4476					X						X	X			36 MONTHS	981020005346252
27	USGW	4477					X						X	X			108 MONTHS	981020005339561
28	USGW	4478					X			X						X	84 MONTHS	981020005346308
29	USGW	4479					X			X						X	24 MONTHS	981020005345085
30	USGW	4480					X			X						X	72 MONTHS	981020005345530
31	USGW	4481					X			X						X	96 MONTHS	981020005331118
32	USGW	4482						X		X				X			48 MONTHS	981020005339292
33	USGW	4483						X					X	X			84 MONTHS	981020005358374
34	USGW	4484						X		X						X	24 MONTHS	981020005332256
35	USGW	4485						X		X						X	108 MONTHS	981020005334643
36	USGW	4486	X							X				X			96 MONTHS	981020005347221
37	USGW	4487	X							X						X	132 MONTHS	981020005334829
38	USGW	4488					X			X				X			36 MONTHS	981020005333285
39	USGW	4489					X			X						X	72 MONTHS	981020005329164
40	USGW	4490						X		X				X			84 MONTHS	981020005347362
41																		
42																		
43																		
44																		
45																		

I HEREBY AUTHORIZE (b)(6)  
OF THIS FORM OF  
IMPRISONMENT FOR

SIGNATURE OF OWNER

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

on 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

(b)(6)

Control Number: 4801B8432

Office Id: 974801

Service Date(s).

Begin: 27-APR-11

End: 27-APR-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	3.00	156.00

Total Due \$ 156.00

Remarks: Health Certificate # T1117615, 7617, 7618

Payment Information

Nfc Id  
999999999V

Date	Amount	Payment Type	Account/Check #
03-MAY-11	\$ 156.00	Check	172

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

172

DATE

4/26/11

PAY TO THE  
ORDER OF

U. S. S. A.

\$1560-

Ciento Cincuenta y Seis y 00/100

Big Bend  
Banks

1<sup>ST</sup>

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



(b)(6)

Security Features  
Printed  
into the Back

MP

Service Date

Begin:4-27-11

Code

Description

Unit Cost

# of Units

1	HC T1117615	\$52.00	(30hd) 1	\$52.00
2	HC T1117617	\$52.00	(40hd) 1	\$52.00
3	HC T1117618	\$52.00	(40hd) 1	\$52.00
4				
5				
6				

Total Due \$156.00

Payment Information

Date	Amount	Payment Type	Account / Check #
		On Account	
4/26/2011	\$156.00	Check	172
		CASH	
		Money Order	
		Credit Card	

4601B8432



PRESIDIO P PORT / HORSE EXPORT

Name and Address of Remitter:

Service Date

Double JJ Horse Co.

Begin:4-27-11

2621 W 116 th St

Perkins Ok 74059



<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	
1	HC T1117615	\$52.00	(30hd) 1	\$52.00
2	HC T1117617	\$52.00	(40hd) 1	\$52.00
3	HC T1117618	\$52.00	(40hd) 1	\$52.00
4				
5				
6				
Total Due				\$156.00

Payment Information

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
		On Account	
4/26/2011	\$156.00	Check	172
		CASH	
		Money Order	
		Credit Card	

4801B8432

TH/76 21

**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.

1. Name and Address of Exporter:

Nombre y Direccion del Exportador:

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

2. 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 5121 985170001090106	Mare	120 Months	USFS 5131 985170001051692	Mare	144 Months
USFS 5122 985170001091299	Gelding	120 Months	USFS 5132 985170001041079	Gelding	96 Months
USFS 5123 985170001084540	Gelding	48 Months	USFS 5133 985170001088835	Gelding	60 Months
USFS 5124 985170001050461	Mare	120 Months	USFS 5134 985170001042484	Gelding	48 Months
USFS 5125 985170001092893	Gelding	120 Months	USFS 5135 985170001103517	Mare	36 Months
USFS 5126 985170001099643	Gelding	120 Months	USFS 5136 985170001057494	Mare	96 Months
USFS 5127 98517000105441	Gelding	60 Months	USFS 5137 985170001095312	Mare	48 Months
USFS 5128 985170001089331	Gelding	144 Months	USFS 5138 985170001054648	Mare	72 Months
USFS 5129 985170001084839	Mare	120 Months	USFS 5139 985170001103727	Gelding	48 Months
USFS 5130 985170001091715	Mare	144 Months	USFS 5140 985170001091545	Mare	72 Months

4/27/11

Microchip number / Numero de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Numero de microchip	Sex/ Sexo	Approximate age/ Eda d aproximada
USFS 5141 985170001089868	Mare	72 Months	USFS 5146 985170001055072	Mare	48 Months
USFS 5142 985170001041402	Mare	36 Months	USFS 5147 985170001056317	Mare	36 Months
USFS 5143 985170001102832	Mare	120 Months	USFS 5148 985170001055896	Mare	60 Months
USFS 5144 985170001094571	Mare	48 Months	USFS 5149 985170001095590	Mare	24 Months
USFS 5145 985170001076530	Mare	144 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 exportacion, los animales no presentaron signos de enfermedades infectocontagiosas.*

Inspection date / Fecha de inspeccion 4/24/2011

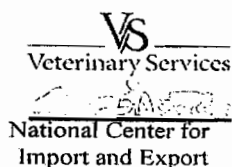
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

*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. 7611762  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

ccwB

The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks]  
is 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: April 25th, 2011*

(b)(6)

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

4/25/2011

**W H BROWN DVM**

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

(b)(6)

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

4-27-11

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

Mexico, Slaughter horse HC



**AFFIDAVIT  
DECLARACION JURADA**

I (print) \_\_\_\_\_ declare that horses

included in this shipment and accompanied by the health certificate number 7117621 have

not been fed to or treated within the last one hundred and eighty days (180) 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 7117621 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta (180) 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 ronidazol.

*Aristolochia spp y cualquier otra preparacion derivada de esta planta, cloranfenicol, doroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incuding furazolidona) y rodinazole.*

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, asi com esteroides anabolicos.*

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

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

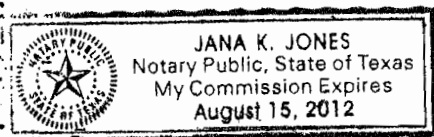
Date and Signature of exporter  
Fecha y firma del exportador

(b)(6)

Date and signature of the Notary Public  
Fecha y firma del Ntrario Publico

(b)(6)

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

711-17671

TIME HORSES LOADED ON CONVEYANCE	DATE 4/25/2011	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <b>Gainesville, TX</b>
VEHICLE LICENSE NO. AND DRIVER'S NAME (b)(6)		NAME OF AUCTION/MARKET
CONSIGNOR (OWNER/SHIPPER) NAME (b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME <b>Inter Meats, S.A. DE C.V.</b>
STREET ADDRESS (b)(6)		STREET ADDRESS <b>AV. Universidad NO. 602 INT. 19 Union Ganadera</b>
CITY, STATE, ZIP CODE (b)(6) TX (b)(6)		CITY, STATE, ZIP CODE <b>AGUASCALIENTES, AGS. C.P. 20130</b>
AREA CODE & TELEPHONE NO. (b)(6)		AREA CODE & TELEPHONE NO. <b>(626)453-3750</b>

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	5136						X		X				X			96 Months L-Brand	985170001057494
17	USFS	5137	X							X				X			48 Months	985170001095312
18	USFS	5138						X		X				X			72 Months	985170001054648
19	USFS	5139					X			X						X	48 Months	985170001103727
20	USFS	5140	X							X				X			72 Months	985170001091545
21	USFS	5141						X		X				X			72 Months	985170001089868
22	USFS	5142	X							X				X			36 Months	985170001041402
23	USFS	5143						X		X				X			120 Months	985170001102832
24	USFS	5144					X			x				X			48 Months	985170001094571
25	USFS	5145					X			X				X			144 Months Brand	985170001076530
26	USFS	5146	X							X				X			48 Months	985170001055072
27	USFS	5147	X							X				X			36 Months	985170001056317
28	USFS	5148	X							X				X			60 Months	985170001055896
29	USFS	5149	X							X				X			24 Months	985170001095590

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 AUTHO

COMPLETED BY AND THE INFORMATION IN IT AS  
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 ("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  
(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

TIME HORSES LOADED ON CONVEYANCE

DATE:  
4/25/2011

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE  
Gainesville, TX

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

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME  
(b)(6)

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

STREET ADDRESS  
(b)(6)

STREET ADDRESS  
AV. Universidad NO. 602 INT. 19 Union Ganadera

CITY, STATE, ZIP CODE  
(b)(6) TX (b)(6)

CITY, STATE, ZIP CODE  
AGUASCALIENTES, AGS. C.P. 20130

AREA CODE & TELEPHONE NO.  
(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	5121						X		X				X			120 Months	985170001090106
2	USFS	5122						X		X						X	120 Months	985170001091299
3	USFS	5123						X		X						X	48 Months	985170001084540
4	USFS	5124					X			X				X			120 Months 113-Hip	985170001050461
5	USFS	5125				X				X						X	120 Months	985170001092893
6	USFS	5126					X			X						X	120 Months	985170001099643
7	USFS	5127				X				X						X	60 Months	985170001054441
8	USFS	5128				X				X						X	144 Months	985170001089331
9	USFS	5129						X		X				X			120 Months L-Brand	985170001084839
10	USFS	5130						X		X				X			144 Months L-Brand	985170001091715
11	USFS	5131					X			X				X			144 Months	985170001051692
12	USFS	5132						X		X						X	96 Months	985170001041079
13	USFS	5133					X			X						X	60 Months	985170001088835
14	USFS	5134					X			X						X	48 Months	985170001042484
15	USFS	5135					X			X				X			36 Months	985170001103517

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(" 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

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

Originating Office Phone

Control Number: 480188433

(b)(6)

Office Id: 974801

Service Date(s)

Begin: 27-APR-11

End: 27-APR-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 # T1117621

Payment Information

Nfc Id  
9999999999V

Date	Amount	Payment Type	Account/Check #
03-MAY-11	\$ 52.00	Check	173

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

173

DATE 4/26/11

PAY TO THE ORDER OF

*U.S.D.A*

\$ 52.00

*Cincoenta y dos*

DOLLARS

**Big Bend Banks**  
1<sup>ST</sup> PRESIDIO BANK  
P.O. BOX 2229  
PRESIDIO, TEXAS 79845



(b)(6)

MEMO (b)(6)

Service Date

Begin: 4-27-11

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

Code	Description	Unit Cost	# of Units	Total Dollars
1	HCT1117621	\$52.00	(29hd) 1	\$52.00
2				
3				
4				
5				
6				
Total Due				\$52.00

Payment Information

Date	Amount	Payment Type	Account / Check #
		On Account	
4/26/2011	\$52.00	Check	173
		Check	
		Money Order	
		Credit Card	

480138433

**PRESIDIO PORT / HORSE EXPORT**

**Name and Address of Remitter:**

**Service Date**

(b)(6)

**Begin:4-27-11**

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	<u>Total Dollars</u>
1	HC T1117621	\$52.00	(29hd) 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	
4/26/2011	\$52.00	Check	173
		Check	
		Money Order	
		Credit Card	

480138433

T 1117619

**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.

1. Name and Address of Exporter:

Nombre y Direccion del Exportador:

(b)(6)

(b)(6)

TX (b)(6)

2. 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 / *Identification 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 5781 985154000286715	Gelding	84 Months	USFS 5791 985154000286689	Mare	144 Months
USFS 5782 985154000286759	Mare	84 Months	USFS 5792 985154000286736	Gelding	108 Months
USFS 5783 985154000286766	Gelding	144 Months	USFS 5793 985154000286744	Mare	84 Months
USFS 5784 985154000286718	Mare	144 Months	USFS 5794 985154000286714	Mare	120 Months
USFS 5785 985154000286751	Mare	96 Months	USFS 5795 985154000286703	Mare	24 Months
USFS 5786 985154000286719	Mare	96 Months	USFS 5796 985154000286808	Mare	120 Months
USFS 5787 985154000286642	Mare	84 Months	USFS 5797 985154000286722	Mare	60 Months
USFS 5788 985154000286743	Mare	120 Months	USFS 5798 985154000286742	Gelding	24 Months
USFS 5789 985154000286755	Mare	144 Months	USFS 5799 985154000286709	Mare	60 Months
USFS 5790 985154000286773	Mare	60 Months	USFS 5800 985154000286723	Mare	120 Months

4/27/14

Microchip number / Numero de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Numero de microchip	Sex / Sexo	Approximate age/Edad aproximada
USFS 5801 985154000286762	Gelding	120 Months	USFS 5806 985154000286797	Mare	120 Months
USFS 5802 985154000286761	Mare	96 Months	USFS 5807 985154000286771	Mare	120 Months
USFS 5803 985154000286770	Gelding	96 Months	USFS 5808 985154000286758	Mare	120 Months
USFS 5804 985154000286752	Gelding	72 Months	USFS 5809 985154000286699	Mare	120 Months
USFS 5805 985154000286777	Mare	72 Months	USFS 5810 985154000286727	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 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 inspection 4/24/2011

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.*

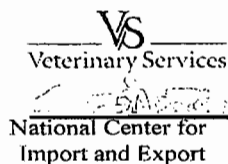
4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

*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.*

Mexico, Slaughter horse HC



USDA



Health Certificate No. 71117619  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

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

**Khris Crowe, DVM**

Name of Accredited Veterinarian  
*Nombre del Medico Veterinario  
Acreditado*

*Date: April 25th, 2011*

(b)(6)

*4/25/2011*

and Date

*Firma del Medico Veterinario Acreditado y  
Fecha*

W H BROWN DVM

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

(b)(6)

*4-27-11*

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).*

Mexico, Slaughter horse HC

CENK

**AFFIDAVIT  
DECLARACION JURADA**

I (print) \_\_\_\_\_ declare that horses

included in this shipment and accompanied by the health certificate number 7117619 have

not been fed to or treated within the last one hundred and eighty days (180) 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 7117619 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta (180) 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 ronidazol.

*Aristolochia sppy cualquier otra preparacion derivada de esta planta, cloranfenicol, doroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incudingfurazolidona) y rodinazole.*

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

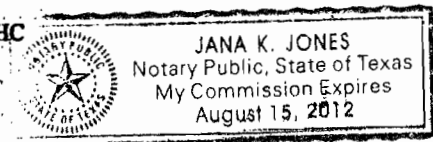
*Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, asi com esteroides anabolicos.*

3. The following thirosthatatics substances were not used: thiouracil, methylthiouracil phenylthiouracil and propylthiouracil.  
*Que no fueron empleados los siguie* (b)(6)  
*propiltiuracilo.*

Date and Signature of exporter  
*Fecha y firma del exportador*

Date and signature of the Notary Public  
*Fecha y firma del Ntrario Publico*

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

TIME HORSES LOADED ON CONVEYANCE	DATE <b>4/25/2011</b>	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <b>Whitesboro, TX</b>
VEHICLE LICENSE NO. AND DRIVER'S NAME <b>(b)(6)</b>	NAME OF AUCTION/MARKET	
CONSIGNOR (OWNER/SHIPPER) NAME <b>(b)(6)</b>	CONSIGNEE (RECEIVER/DESTINATION) NAME <b>Inter Meats, S.A. DE C.V.</b>	
STREET ADDRESS <b>(b)(6)</b>	STREET ADDRESS <b>AV. Universidad NO. 602 INT. 19 Union Ganadera</b>	
CITY AND STATE ZIP CODE <b>(b)(6) TX (b)(6)</b>	CITY, STATE, ZIP CODE <b>AGUASCALIENTES, AGS. C.P. 20130</b>	
AREA CODE & TELEPHONE NO. <b>(b)(6)</b>	AREA CODE & TELEPHONE NO. <b>(626)453-3750</b>	

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	5796						X		X				X			120 Months	985154000286808
17	USFS	5797			X					X				X			60 Months	985154000286722
18	USFS	5798						X		X						X	24 Months	985154000286742
19	USFS	5799				X				X				X			60 Months	985154200086709
20	USFS	5800					X			X				X			120 Months	985154000286723
21	USFS	5801	X							X						X	120 Months B25-LHip	985154000286762
22	USFS	5802				X				X				X			96 Months 38-RHip	985154000286761
23	USFS	5803				X				X						X	96 Months B25-LHip	985154000286770
24	USFS	5804		X						X						X	72 Months	985154000286752
25	USFS	5805				X				X				X			72 Months	985154000286777
26	USFS	5806	X							X				X			120 Months Brand-LHip	985154000286797
27	USFS	5807						X		X				X			120 Months Brand-LHip	985154000286771
28	USFS	5808				X				X				X			120 Months Brand-LHip	985154000286758
29	USFS	5809	(b)(6)														120 Months Brand-LHip	985154000286699
30	USFS	5810															120 Months Brand-LHip	985154000286727

HORSES HAVE HAD ACCESS TO  
HOURS IMMEDIATELY BEFORE

SIGNATURE

I HEREBY AUTHORIZE THE  
COMPLETED BY THE CFIA  
USING A FALSIFIED FORM  
\$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

SIGNATURE OF OWNER/SHIPPER  
(the best of my knowledge.)

ADIAN FOOD INSPECTION AGENCY (CFIA)

TE

TE

RECCION GENERAL DE INSPECCION EN  
FRONTERAS (DGIF)

**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 0529-0160. 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

TIME HORSES LOADED ON CONVEYANCE	DATE: <b>4/25/2011</b>	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <b>Whitesboro, TX</b>
VEHICLE LICENSE NO. AND DRIVER'S NAME <b>(b)(6)</b>	NAME OF AUCTION/MARKET	
CONSIGNOR (OWNER/SHIPPER) NAME <b>(b)(6)</b>	CONSIGNEE (RECEIVER/DESTINATION) NAME <b>Inter Meats, S.A. DE C.V.</b>	
STREET ADDRESS <b>(b)(6)</b>	STREET ADDRESS <b>AV. Universidad NO. 602 INT. 19 Union Ganadera</b>	
CITY, STATE, ZIP CODE <b>(b)(6)</b>	CITY, STATE, ZIP CODE <b>AGUASCALIENTES, AGS. C.P. 20130</b>	
NO. <b>(b)(6)</b>	AREA CODE & TELEPHONE NO. <b>(626)453-3750</b>	

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

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	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	5781				X				X						X	84 Months	985154000286715
2	USFS	5782					X			X				X			84 Months	985154000286759
3	USFS	5783		X						X						X	144 Months	985154000286766
4	USFS	5784					X			X				X			144 Months	985154000286718
5	USFS	5785						X		X				X			96 Months	985154000286751
6	USFS	5786					X			X				X			96 Months	985154000286719
7	USFS	5787	X							X				X			84 Months	985154000286642
8	USFS	5788			X					X				X			120 Months	985154000286743
9	USFS	5789			X					X				X			144 Months	985154000286755
10	USFS	5790						X		X				X			60 Months	985154000286773
11	USFS	5791		X						X				X			144 Months	985154000286689
12	USFS	5792					X			X						X	108 Months	985154000286736
13	USFS	5793					X			X				X			84 Months	985154000286744
14	USFS	5794					X			X				X			120 Months	985154000286714
15	USFS	5795		X						X				X			24 Months	985154000286703

HORSES HAVE HAD ACCESS TO  
HOURS IMMEDIATELY BEFORE

SIGNATURE

I HEREBY AUTHORIZE THE 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)  
(the best of my knowledge.)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN  
FRONTERAS (DGIF)

EST.

DATE

TIME



T11 7622

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.

1. Name and Address of Exporter:

*Nombre y Direccion del Exportador:*

(b)(6)

(b)(6)

TX (b)(6)

2. 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 / *Identification de los animales a ser exportados.*

**All Microchips are on Left side Top of Neck.**

Microchip number / <i>Numero de microchip</i>	Sex/Sexo	Approximate age/Edad <i>aproximada</i>	Microchip Number / <i>Numero de microchip</i>	Sex / Sexo	Approximate age/ Edad <i>aproximada</i>
USFS 7281 985170001080107	Mare	144 Months	USFS 7291 985170001068514	Mare	120 Months
USFS 7282 985170001051208	Mare	36 Months	USFS 7292 985170001075903	Mare	72 Months
USFS 7283 985170001080047	Mare	120 Months	USFS 7293 985170001043549	Mare	24 Months
USFS 7284 985170001077907	Mare	36 Months	USFS 7294 985170001069148	Mare	48 Months
USFS 7285 985170001049533	Mare	120 Months	USFS 7295 985170001032181	Mare	72 Months
USFS 7286 985170001035071	Mare	144 Months	USFS 7296 985170001068956	Mare	72 Months
USFS 7287 985170001048326	Mare	72 Months	USFS 7297 985170001069663	Mare	48 Months
USFS 7288 985170001079523	Mare	36 Months	USFS 7298 985170001033784	Mare	24 Months
USFS 7289 985170001075163	Mare	144 Months	USFS 7299 985170001031715	Mare	24 Months
USFS 7290 985170001078321	Gelding	24 Months	USFS 7300 985170001035422	Mare	48 Months

Microchip number / Numero de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Numero de microchip	Sex /Sexo	Approximate age/ Eda d aproximada
USFS 7301 985170001080787	Mare	48 Months	USFS 7306 985170001076766	Mare	36 Months
USFS 7302 985170001066531	Mare	36 Months	USFS 7307 985170001067191	Mare	24 Months
USFS 7303 985170001068914	Mare	24 Months	USFS 7308 985170001065235	Mare	48 Months
USFS 7304 985170001068426	Mare	144 Months	USFS 7309 985170001031859	Mare	144 Months
USFS 7305 985170001068748	Mare	72 Months	USFS 7310 985170001031176	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 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 inspection 4/24/2011

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.*

Mexico, Slaughter horse HC

USDA



Health Certificate No. 7711-1622  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

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

(b)(6)

4/25/2011  
Date

*Firma del Medico Veterinario Acreditado y  
Fecha*

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

(b)(6)

4-27-11

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

Mexico, Slaughter horse HC

CCLAB

**AFFIDAVIT  
DECLARACION JURADA**

I (print) \_\_\_\_\_ declare that horses

included in this shipment and accompanied by the health certificate number 7117622 have

not been fed to or treated within the last one hundred and eighty days (180) 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 7117622 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta (180) 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 ronidazol.

*Aristolochia sppy cualquier otra preparacion derivada de esta planta, cloranfenicol, doroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incuding furazolidona) y rodinazole.*

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, asi com esteroides anabolicos.*

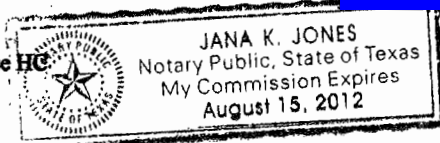
3. The following thirosthatics substances were not used: thiouracil, methylthiouracil phenylthiouracil and propylthiouracil.

*Que no fueron empleados los sigui(b)(6)  
propiltiuracilo.*

Date and Signature of exporter  
*Fecha y firma del exportador*

Date and signature of the Notary Public  
*Fecha y firma del Ntrario Publico*

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

TIME HORSES LOADED ON CONVEYANCE	DATE 4/25/2011	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Whitesboro, TX
VEHICLE LICENSE NO. AND DRIVER'S NAME (b)(6)		NAME OF AUCTION/MARKET
CONSIGNOR (OWNER/SHIPPER) NAME (b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME Inter Meats, S.A. DE C.V.
STREET ADDRESS (b)(6)		STREET ADDRESS AV. Universidad NO. 602 INT. 19 Union Ganadera
CITY, STATE, ZIP CODE (b)(6)		CITY, STATE, ZIP CODE AGUASCALIENTES, AGS. C.P. 20130
AREA CODE & TELEPHONE NO. (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		
16	USFS	7296	X							X				X			72 Months	985170001068956
17	USFS	7297	X							X				X			48 Months	985170001069663
18	USFS	7298	X							X				X			24 Months	985170001033784
19	USFS	7299	X							X				X			24 Months	985170001031715
20	USFS	7300	X							X				X			48 Months	985170001035422
21	USFS	7301						X		X				X			48 Months	985170001080787
22	USFS	7302						X		X				X			36 Months	985170001066531
23	USFS	7303	X							X				X			24 Months	985170001068914
24	USFS	7304						X		X				X			144 Months	985170001068426
25	USFS	7305			X					X				X			72 Months	985170001068748
26	USFS	7306	X							X				X			36 Months	985170001076766
27	USFS	7307	X							X				X			24 Months	985170001067101
28	USFS	7308	X							X				X			48 Months	985170001065235
29	USFS	7309					X			X				X			144 Months 7306-L-Shldr	985170001031859
30	USFS	7310						X		X				X			120 Months	985170001031176

HORSES HAVE HAD ACCESS TO  
HOURS IMMEDIATELY BEFORE

SIGNATURE

I HEREBY AUTHORIZE THE C  
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(' certify that  
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

TIME HORSES LOADED ON CONVEYANCE	DATE: 4/25/2011	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Whitesboro, TX
SINGLE LICENSE NO. AND DRIVER'S NAME (b)(6)		NAME OF AUCTION/MARKET
CONSIGNOR (OWNER/SHIPPER) NAME (b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME Inter Meats, S.A. DE C.V.
STREET ADDRESS (b)(6)		STREET ADDRESS AV. Universidad NO. 602 INT. 19 Union Ganadera
CITY, STATE, ZIP CODE (b)(6) TX (b)(6)		CITY, STATE, ZIP CODE AGUASCALIENTES, AGS. C.P. 20130
AREA CODE & TELEPHONE NO. (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	7281	X							X				X			144 Months	985170001080107
2	USFS	7282	X							X				X			36 Months 1295-L-Shldr,LHip	985170001051208
3	USFS	7283						X		X				X			120 Months	985170001080047
4	USFS	7284					X			X				X			36 Months	985170001077907
5	USFS	7285		X						X				X			120 Months	985170001049533
6	USFS	7286					X			X				X			144 Months	985170001035071
7	USFS	7287						X		X				X			72 Months	985170001048326
8	USFS	7288	X							X				X			36 Months	985170001079523
9	USFS	7289	X							X				X			144 Months	985170001075163
10	USFS	7290	X							X						X	24 Months	985170001078321
11	USFS	7291	X							X				X			120 Months	985170001068514
12	USFS	7292					X			X				X			72 Months	985170001075903
13	USFS	7293	X							X				X			24 Months	985170001043549
14	USFS	7294			X					X				X			48 Months	985170001069148
15	USFS	7295						X		X				X			72 Months	985170001032181

HORSES HAVE HAD ACCESS TO  
HOURS IMMEDIATELY BEFORE

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 (certified by the best of my knowledge.)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN  
FRONTERAS (DGIF)

EST.

DATE

TIME

T1117620

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.

1. Name and Address of Exporter:

Nombre y Direccion del Exportador:

(b)(6)

(b)(6)

X (b)(6)

2. 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 / *Identification 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 7679 985154000286725	Mare	36 Months	USFS 7689 985154000286553	Gelding	36 Months
USFS 7680 985154000286731	Mare	120 Months	USFS 7690 985154000286568	Mare	36 Months
USFS 7681 985154000286803	Mare	36 Months	USFS 7691 985154000286521	Gelding	36 Months
USFS 7682 985154000286726	Mare	144 Months	USFS 7692 985154000286522	Gelding	36 Months
USFS 7683 985154000286792	Mare	36 Months	USFS 7693 9851540002867422	Mare	36 Months
USFS 7684 985154000286716	Mare	60 Months	USFS 7694 985154000286563	Mare	36 Months
USFS 7685 985154000286721	Gelding	36 Months	USFS 7695 985154000286569	Mare	36 Months
USFS 7686 985154000286778	Gelding	36 Months	USFS 7696 985154000286543	Mare	96 Months
USFS 7687 985154000286747	Mare	36 Months	USFS 7697 985154000286505	Mare	36 Months
USFS 7688 985154000286708	Mare	96 Months	USFS 7698 985154000286582	Gelding	36 Months

Microchip number / Numero de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Numero de microchip	Sex / Sexo	Approximate age/ Eda d aproximada
USFS 7699 985154000286523	Mare	48 Months	USFS 7733 985154000286562	Mare	120 Months
USFS 7700 985154000286674	Mare	72 Months	USFS 7734 985154000286500	Mare	96 Months
USFS 7730 985154000286547	Mare	36 Months	USFS 7735 985154000286541	Gelding	96 Months
USFS 7731 985154000286624	Gelding	72 Months	USFS 7736 985154000286610	Gelding	36 Months
USFS 7732 985154000286506	Mare	96 Months	USFS 7737 985154000286511	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 inspection 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 inspection 4/24/2011

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.*

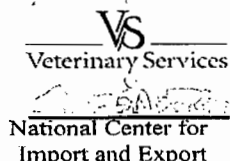
4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

*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.*

Mexico, Slaughter horse HC



USDA



Health Certificate No. 71117620  
(Valid only if the USDA Veterinary Seal  
Appears over the Certificate Number)

[The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks]  
*Los 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: April 25th, 2011*

**W H BROWN DVM**

Name of Endorsing Federal Veterinarian

*Nombre del Medico Veterinario Federal*

*que endosa.*

(b)(6)

(b)(6)

*4/25/2011*

*4-27-11*

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

Cee/W

AFFIDAVIT  
DECLARACION JURADA

I (print) \_\_\_\_\_ declare that horses

included in this shipment and accompanied by the health certificate number 7117620 have

not been fed to or treated within the last one hundred and eighty days (180) 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 7117620 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta (180) 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 ronidazol.

*Aristolochia sppy cualquier otra preparacion derivada de esta planta, cloranfenicol, doroformo, clorpromazina, colchicine, dapsona, demetridazole, metronidazol, nitrofurans (incudingfurazolidona) y rodinazole.*

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, asi com esteroides anabolicos.*

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

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

Date and Signature of exporter

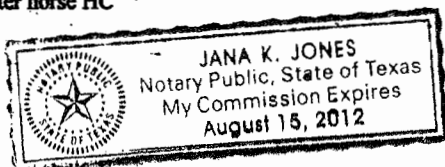
Fecha y firma del exportador

(b)(6)

Date and signature of the Notary Public

Fecha y firma del Ntrario Publico

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

71117620

TIME HORSES LOADED ON CONVEYANCE

DATE  
4/25/2011

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE  
Whitesboro, TX

VEHICLE LICENSE NO. AND DRIVER'S NAME

NAME OF AUCTION/MARKET

CONSIGNEE (OWNER/SHIPPER) NAME

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

STREET ADDRESS

STREET ADDRESS  
AV. Universidad NO. 602 INT. 19 Union Ganadera

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE  
AGUASCALIENTES, AGS. C.P. 20130

AREA CODE & TELEPHONE NO.

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	7694					X			X				X			36 Months	985154000286563
17	USFS	7695					X			X				X			36 Months	985154000286569
18	USFS	7696					X			X				X			96 Months L5-LHip	985154000286543
19	USFS	7697						X		X				X			36 Months	985154200086505
20	USFS	7698					X			X						X	36 Months C-LShldr	985154000286582
21	USFS	7699						X		X				X			48 Months	985154000286523
22	USFS	7700						X		X				X			72 Months L5-LHip	985154000286674
23	USFS	7730					X			X				X			36 Months	985154000286547
24	USFS	7731				X				X						X	72 Months	985154000286624
25	USFS	7732					X			X				X			96 Months L5-LHip	985154000286506
26	USFS	7733					X			X				X			120 Months L5-LHip	985154000286562
27	USFS	7734					X			X				X			96 Months C-LShldr	985154000286500
28	USFS	7735				X				X						X	96 Months C-LShldr	985154000286541
29	USFS	7736				X				X						X	36 Months	985154000286610
30	USFS	7737	X														120 Months L5-LHip	985154000286511

HORSES HAVE HAD ACCESS TO FOOD, WATER AND VET. SUPPLIES  
HOURS IMMEDIATELY BEFORE LOADING

SIGNATURE

I HEREBY AUTHORIZE THE CFIA TO DO ANYTHING NECESSARY TO  
COMPLETED BY THE CFIA OR DGIF TO DO ANYTHING NECESSARY TO  
USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN  
\$10,000 OR IMPRISONMENT FOR  
SIGNATURE OF OWNER/SHIPPER (the best of my knowledge.)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN  
FRONTERAS (DGIF)

EST.

DATE

TIME