

**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

76617620

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

(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	7679					X			X				X			36 Months	985154000286725
2	USFS	7680				X				X				X			120 Months C-LShldr	985154000286731
3	USFS	7681						X		X				X			36 Months	985154000286803
4	USFS	7682					X			X				X			144 Months	985154000286726
5	USFS	7683						X		X				X			36 Months	985154000286792
6	USFS	7684					X			X				X			60 Months L5-LHip	985154000286716
7	USFS	7685					X			X						X	36 Months	985154000286721
8	USFS	7686				X				X						X	36 Months	985154000286778
9	USFS	7687						X		X				X			36 Months	985154000286747
10	USFS	7688						X					X	X			96 Months	985154000286708
11	USFS	7689						X		X						X	36 Months	985154000286553
12	USFS	7690					X			X				X			36 Months	985154000286568
13	USFS	7691					X			X						X	36 Months	985154000286521
14	USFS	7692	X							X						X	36 Months	985154000286522
15	USFS	7693						X		X				X			36 Months	985154000286422

HORSES HAVE HAD ACC
HOURS IMMEDIATELY B

SIGNATURE

I HEREBY AUTHORIZE
COMPLETED BY THE CF
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
the best of my knowledge.)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN
FRONTERAS (DGIF)

EST.

DATE

TIME

T1117629

**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)

(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 / <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 5751 985154000286764	Mare	96 Months	USFS 5761 98515400028665	Mare	144 Months
USFS 5752 985154000286756	Mare	120 Months	USFS 5762 985154000286774	Mare	108 Months
USFS 5753 985154000286698	Mare	108 Months	USFS 5763 985154000286741	Mare	24 Months
USFS 5754 985154000286602	Mare	96 Months	USFS 5764 985154000286775	Mare	120 Months
USFS 5755 985154000286737	Mare	96 Months	USFS 5765 985154000286702	Gelding	84 Months
USFS 5756 985154000286720	Mare	120 Months	USFS 5766 985154000286746	Gelding	120 Months
USFS 5757 985154000286767	Gelding	120 Months	USFS 5767 985154000286745	Gelding	36 Months
USFS 5758 985154000286754	Gelding	120 Months	USFS 5768 985154000286739	Gelding	144 Months
USFS 5759 985170000943256	Mare	96 Months	USFS 5769 985154000286760	Gelding	60 Months
USFS 5760 985154000286769	Mare	60 Months	USFS 5770 985154000286710	Mare	144 Months

Microchip number / Numero de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Numero de microchip	Sex / Sexo	Approximate age/Edad aproximada
USFS 5771 985154000286686	Mare	108 Months	USFS 5776 985154000286740	Gelding	144 Months
USFS 5772 985154000286728	Mare	120 Months	USFS 5777 985154000286701	Mare	120 Months
USFS 5773 985154000286705	Mare	96 Months	USFS 5778 985154000286789	Mare	144 Months
USFS 5774 985154000286780	Mare	60 Months	USFS 5779 985154000286730	Mare	144 Months
USFS 5775 985154000286704	Mare	144 Months	USFS 5780 985154000286640	Gelding	108 Months

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

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

A la 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. 1117629
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

CCB

5. [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

(b)(6)



4/25/2011

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

Mexico, Slaughter horse HC

CueB

**AFFIDAVIT
DECLARACION JURADA**

I (print) _____ declare that horses

included in this shipment and accompanied by the health certificate number 71117629 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, acompanados por el certificado sanitario numero 71117629 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta (180) dias 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.

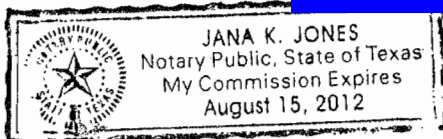
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol , raptopamine, asi com esteroides anabolicos.

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

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FORM
APPROVED
MB NO.
0579-0160

71117629

TIME HORSES LOADED ON CONVEYANCE

DATE:
4/25/2011

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

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

NAME OF AUCTION/MARKET

(b)(6) NAME

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

(b)(6) ADDRESS

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

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

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

(b)(6) 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		
1	USFS	5751					X			X				X			96 Months	985154000286764
2	USFS	5752					X			X				X			120 Months	985154000286756
3	USFS	5753					X			X				X			108 Months	985154000286698
4	USFS	5754			X					X				X			96 Months	985154000286602
5	USFS	5755					X			X				X			96 Months JNP-LSHldr	985154000286737
6	USFS	5756					X			X				X			120 Months	985154000286720
7	USFS	5757					X			X						X	120 Months	985154000286767
8	USFS	5758						X		X						X	120 Months	985154000286754
9	USFS	5759					X			X				X			96 Months	985170000943256
10	USFS	5760	X							X				X			60 Months	985154000286769
11	USFS	5761					X			X				X			144 Months	985154000286765
12	USFS	5762				X				X				X			108 Months	985154000286774
13	USFS	5763					X			X				X			24 Months	985154000286741
14	USFS	5764					X			X				X			120 Months	985154000286775
15	USFS	5765														X	84 Months	985154000286702

HORSES HAVE HAD ACCESS TO
HOURS IMMEDIATELY BEFORE

SIGNATURE

I HEREBY AUTHORIZE THE CFIA OR
COMPLETED BY THE CFIA OR
USING A FALSIFIED FORM IS A
\$10,000 OR IMPRISONMENT FOR
SIGNATURE OF OWNER/SHIPPER
the best of my knowledge.)

DIAN FOOD INSPECTION AGENCY (CFIA)

SECCION GENERAL DE INSPECCION EN
INTERAS (DGIF)

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

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FORM
APPROVED
MB NO.
0579

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	
(b)(6)	CONSIGNEE (RECEIVER/DESTINATION) NAME Inter Meats, S.A. DE C.V.	
(b)(6)	STREET ADDRESS AV. Universidad NO. 602 INT. 19 Union Ganadera	
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		
16	USFS	5766					X			X						X	120 Months	985154000286746
17	USFS	5767						X		X						X	36 Months	985154000286745
18	USFS	5768			X					X						X	144 Months	985154000286739
19	USFS	5769					X			X						X	60 Months D-LShldr	985154200086760
20	USFS	5770					X			X				X			144 Months	985154000286710
21	USFS	5771					X			X				X			108 Months	985154000286686
22	USFS	5772	X							X				X			120 Months	985154000286728
23	USFS	5773	X							X				X			96 Months	985154000286705
24	USFS	5774		X						X				X			60 Months	985154000286780
25	USFS	5775			X					X				X			144 Months	985154000286704
26	USFS	5776					X			X						X	144 Months	985154000286740
27	USFS	5777					X			X				X			120 Months	985154000286701
28	USFS	5778				X				X				X			144 Months	985154000286789
29	USFS	5779						X		X				X			144 Months	985154000286730
30	USFS	5780	X							X						X	108 Months	985154000286640

HORSES HAVE HAD ACCESS TO
HOURS IMMEDIATELY BEFORE

SIGNATURE

I HEREBY AUTHORIZE 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 is true 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

(b)(6)

88-473/1123

174

DATE

4/27/11

PAY TO THE
ORDER OF

V. S. A. A

\$208-

Blm Bend

1ST PRESIDIO

(b)(6)

(b)(6)

DOLLARS

Security Features
Include:

(b)(6)

Service Date

4/27/2011

Whitesboro, TX 76273

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	<u>Total Dollars</u>
1	HCT 1117619	\$52.00	(30hd) 1	\$52.00
2	HCT 1117620	\$52.00	(30hd) 1	\$52.00
3	HCT 1117629	\$52.00	(29hd) 1	\$52.00
4	HCT 1117622	\$52.00	(30hd) 1	\$52.00
5				
6				
Total Due				\$208.00

Payment Information

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
		On Account	
4/27/2011	\$208.00	Check	174
		CHECK	
		Money Order	
		Credit Card	

4801B 8434

PRESIDIO I PORT / HORSE EXPORT

Name and Address of Remitter:



Service Date

4/27/2011

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	<u>Total Dollars</u>
1	HC T 1117619	\$52.00	(30hd) 1	\$52.00
2	HC T 1117620	\$52.00	(30hd) 1	\$52.00
3	HC T 1117629	\$52.00	(29hd) 1	\$52.00
4	HC T 1117622	\$52.00	(30hd) 1	\$52.00
5				
6				
Total Due				\$208.00

Payment Information

<u>Date</u>	<u>Amount</u>	<u>Payment Type</u>	<u>Account / Check #</u>
On Account			
4/27/2011	\$208.00	Check	174
CHECK			
Money Order			
Credit Card			

4801B 8434

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

Originating Office Phone

(b)(6)

Control Number: 4801B8434

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	4.00	208.00

Total Due \$ 208.00

Remarks: Health Certificate # T1117619, 7620, 7629, 7622

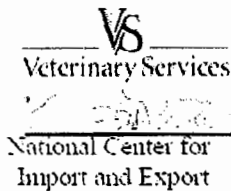
Payment Information

Nfc Id
9999999999V

Date	Amount	Payment Type	Account/Check #
03-MAY-11	\$ 208.00	Check	174

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. T4117623 *CEB*
(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)

2. Name and Address of Importer:

Nombre y Dirección del Importador:

**InterMeats SA de C.V. Av Universidad #602-19 Aguascalientes, Ags, Cp. 20130 MX
011-52-449-914-3180**

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

Microchip number / Numero de microchip	Sex / Sexo	Approximate Age/Edad aproximada	Microchip number / Numero de microchip	Sex / Sexo	Approximate Age/Edad aproximada
985154000280771 USFG3034	MARE	7 years	985154000280770 USFG3042	MARE	7 years
985154000280775 USFG3035	GELDING	13 years	985154000280785 USFG3043	MARE	11 years
985154000280762 USFG3036	MARE	11 years	985154000280931 USFG3044	GELDING	11 years
985154000280768 USFG3037	MARE	6 years	985154000280928 USFG3045	MARE	6 years
985154000280759 USFG3038	GELDING	7 years	985154000280886 USFG3046	MARE	10 years
985154000280756 USFG3039	MARE	8 years	985154000280888 USFG3047	MARE	7 years
985154000280784 USFG3040	GELDING	7 years	985154000280873 USFG3048	MARE	10 years
985154000280778 USFG3041	MARE	11 years	985154000280902 USFG3049	MARE	5 years

Page 1 of 3

Mexico, Slaughter horse HC

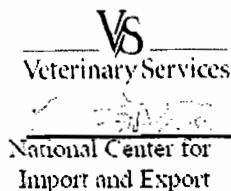
9/27/11



VS
Veterinary Services
National Center for
Import and Export

Health Certificate No. 71117423 *CWB*
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / <i>Numero de microchip</i>	Sex / <i>Sexo</i>	Approximate Age/ <i>Edad</i> <i>aproximada</i>	Microchip number / <i>Numero de microchip</i>	Sex / <i>Sexo</i>	Approximate Age/ <i>Edad</i> <i>aproximada</i>
985154000280890 USFG3050	MARE	9 years	985154000280827 USFG3058	MARE	10 years
985154000280983 USFG3051	MARE	7 years	985154000280575 USFG3059	GELDING	7 years
985154000280999 USFG3052	MARE	13 years	985154000280688 USFG3060	GELDING	10 years
985154000280954 USFG3053	MARE	11 years	985154000280686 USFG3061	GELDING	10 years
985154000280912 USFG3054	MARE	6 years	985154000281061 USFG3062	MARE	7 years
985154000280520 USFG3055	MARE	7 years	985154000280956 USFG3063	MARE	11 years
985154000280586 USFG3056	MARE	8 years	985154000280660 USFG3064	MARE	11 years
985154000280832 USFG3057	MARE	7 years			



Health Certificate No. 7117623
(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 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

(Delete as appropriate / Remueva lo que no aplique)

5. The animals are free of ectoparasites 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

David Taylor DVM
Name of Accredited Veterinarian
*Nombre del Médico Veterinario
Acreditado*

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

(b)(6) April 25, 2011
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)*

DECLARACIÓN JURADA

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number TL117623 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 TL117623 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

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

7117623

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
VEHICLE LICENSE NO. AND DRIVER'S NAME	NAME OF AUCTION/MARKET	
CONSIGNOR (OWNER/SHIPPER) NAME	CONSIGNEE (RECEIVER/DESTINATION) NAME	
STREET	STREET ADDRESS	
CITY, STATE	CITY, STATE, ZIP CODE	
AREA CODE	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	USF6	3034											X	X			985154000	280771
2	USF6	3035											X			X	985154000	280775
3	USF6	3036											X	X			985154000	280762
4	USF6	3037											X	X			985154000	280768
5	USF6	3038											X			X	985154000	280759
6	USF6	3039											X	X			985154000	280756
7	USF6	3040											X			X	985154000	280784
8	USF6	3041											X	X			985154000	280778
9	USF6	3042											X	X			985154000	280770
10	USF6	3043											X	X			985154000	280785
11	USF6	3044											X			X	985154000	280931
12	USF6	3045											X	X			985154000	280928
13	USF6	3046											X	X			985154000	280886
14	USF6	3047											X	X			985154000	280888
15	USF6	3048											X	X			985154000	280873

HORSES HAVE HAD ACCESS TO
HOURS IMMEDIATELY BEFORE

SIGNATURE

I HEREBY AUTHORIZE THE
COMPLETED BY THE CFIA
USING A FALSIFIED FORM IS
\$10,000 OR IMPRISONMENT

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

CONSECUTIVE

INFORMATION IN IT AS
OR KNOWINGLY
NOT MORE THAN
SECTION 1001).

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
(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

76117623

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET
CONS(b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME Intermeats S de CV
STREET		STREET ADDRESS Av Universidad 602-19
CITY		CITY, STATE, ZIP CODE Aguascalientes Ags CO 20130 MX
AREA		AREA CODE & TELEPHONE NO. 011 52 449 914 3180

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	USF6	3044											X	X			985154000	280902
2	USF6	3050											X	X			985154000	280890
3	USF6	3051											X	X			985154000	280983
4	USF6	3052											X	X			985154000	280999
5	USF6	3053											X	X			985154000	280954
6	USF6	3054											X	X			985154000	280912
7	USF6	3055											X	X			985154000	280520
8	USF6	3056											X	X			985154000	280586
9	USF6	3057											X	X			985154000	280832
10	USF6	3058											X	X			985154000	280827
11	USF6	3059											X			X	985154000	280575
12	USF6	3060											X			X	985154000	280688
13	USF6	3061											X			X	985154000	280686
14	USF6	3062											X	X			985154000	281061
15	USF6	3063											X	Y			985154000	280956

HORSES HAVE HAD ACCE
HOURS IMMEDIATELY BEF

SIGNATURE

I HEREBY AUTHORIZE TH
COMPLETED BY THE CFIA
USING A FALSIFIED FORM
\$10,000 OR IMPRISONMENT

SIGNATURE OF OWNER/SH
the best of my knowledge.)

EXECUTIVE

ION IN IT AS
KNOWINGLY
MORE THAN
N 1001).

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
(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

57617623

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET
CONSIGNOR (b)(6)	CONSIGNEE (RECEIVER/DESTINATION) NAME	
STREET ADDRESS	STREET ADDRESS	
CITY, STATE	CITY, STATE, ZIP CODE	
AREA CODE	AREA CODE & TELEPHONE NO.	
CHECK THIS BOX 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	USFG	3064											X	X			9851540	00 280 660
2																		
3																		
4																		
5																		
6																		
7																		
8																		
9																		
10																		
11																		
12																		
13																		
14																		
15																		

HORSES HAVE HAD ACCESS TO WATER AND FEED FOR 6 CONSECUTIVE HOURS IMMEDIATELY BEFORE LOADING	(b)(6)	CANADIAN FOOD INSPECTION AGENCY (CFIA) EST. _____ DATE _____ TIME _____
SIGNATURE		DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF) EST. _____ DATE _____ TIME _____
I HEREBY AUTHORIZE THE COMPLETION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM TO BE A VIOLATION OF THE CUSTOMS ACT (C. SECTION 1001).		
SIGNATURE OF OWNER OR SHIPPER (the best of my knowledge)	Information is true and correct to the best of my knowledge	

(b)(6)

88-473/1123

175

DATE

4/27/11

PAY TO THE
ORDER OF

U. S. A. A

\$52.00

Cincoenta y Dos

DOLLARS

Big Bend
Banks 1ST PRESIDIO
BANK



(b)(6)

(b)(6)

(b)(6)

ME

123047331 02046961

Service Date

4/27/2011

151 Mill RD.
Lebanon, TN 37090

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	<u>Total Dollars</u>
1	HCT 1117623	\$52.00	(30hd) 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	
4/27/2011	\$52.00	Check	175
		CASH	
		Money Order	
		Credit Card	

480138436

PRESIDIO I PORT / HORSE EXPORT

Name and Address of Remitter:

Service Date

(b)(6)

4/27/2011

<u>Code</u>	<u>Description</u>	<u>Unit Cost</u>	<u># of Units</u>	<u>Total Dollars</u>
1	HC T 1117623	\$52.00	(30hd) 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			
4/27/2011	\$52.00	Check	175
CASH			
Money Order			
Credit Card			

480138436

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

Originating Office Phone

(b)(6)

Control Number: 4801B8436

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 # T1117623

Payment Information

Nfc Id
9999999999V

Date	Amount	Payment Type	Account/Check #
03-MAY-11	\$ 52.00	Check	175

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. T11-18311
(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)

(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 8801 985170000992544	Gelding	36 Months	USGV 8809 985170000992073	Mare	60 Months
USGV 8802 985170001023765	Mare	72 Months	USGV 8810 985170001024353	Gelding	96 Months
USGV 8803 985170001018324	Gelding	108 Months	USGV 8811 985170001004382	Gelding	108 Months
USGV 8804 985170000994185	Gelding	96 Months	USGV 8812 985170001004740	Mare	96 Months
USGV 8805 985170000993584	Mare	84 Months	USGV 8813 985170000995323	Gelding	72 Months
USGV 8806 985170001023433	Mare	96 Months	USGV 8814 985170001028454	Gelding	84 Months
USGV 8807 985170001015499	Gelding	72 Months	USGV 8815 985170000991411	Gelding	60 Months
USGV 8808 985170000994612	Mare	72 Months	USGV 8816 985170001015808	Gelding	108 Months

Mexico, Slaughter horse HC

4/26/11



Health Certificate No. **T11-18311**
(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 8817 985170000993370	Gelding	120 Months	USGV 8824 985170000986880	Mare	60 Months
USGV 8818 985170000996618	Mare	96 Months	USGV 8825 985170001023293	Mare	48 Months
USGV 8819 985170001012112	Gelding	72 Months	USGV 8826 985170000987976	Gelding	60 Months
USGV 8820 985170000991633	Gelding	60 Months	USGV 8827 985170001036099	Gelding	60 Months
USGV 8821 985170001023896	Gelding	84 Months	USGV 8828 985170000991438	Mare	60 Months
USGV 8822 985170000989916	Mare	120 Months	USGV 8829 985170001004875	Gelding	72 Months
USGV 8823 985170000990686	Gelding	84 Months	USGV 8830 985170001016289	Mare	48 Months

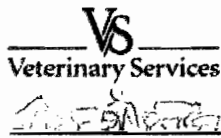
CERTIFICATION STATEMENTS / CERTIFICACIONES

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* 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.



Health Certificate No. T11-18311
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Page 4 of 5

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

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

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

Name of Accredited Veterinarian

Nombre del Médico Veterinario

Acreditado Denise Fowler

Name of Endorsing Federal Veterinarian

Nombre del Médico Veterinario

Federal que endosa

M.L. VSA

(b)(6)

(b)(6)

4/25/11

26 Apr 11

Signature and Date

Signature of Endorsing Federal Veterinarian
and Date

*Firma del Médico Veterinario Acreditado
y Fecha*

*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**

Page 5 of 5

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number T11-18311 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 T11-18311 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.

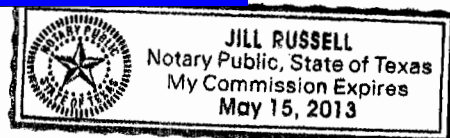
Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo.

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)

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FORM
APPROVED
OMB NO.
0579-0160

T11-18311

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Brookston, Texas 75421

(b)(6)

NAME OF AUCTION/MARKET

A

(b)(6)

SIGNEE (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	8801						Sr		X						X	36	985170000992544
2	USGV	8802	X							X				X			72	985170001023765
3	USGV	8803						Sr		X						X	108	985170001018324
4	USGV	8804						Pt		X						X	96	985170000994185
5	USGV	8805		X						X				X			84	985170000993584
6	USGV	8806		X						X				X			96	985170001023433
7	USGV	8807						Pt		X						X	72	985170001015499
8	USGV	8808			X					X				X			72	985170000994612
9	USGV	8809	X							X				X			60	985170000992073
10	USGV	8810						Sr		X						X	96	985170001024353
11	USGV	8811	X							X						X	108	985170001004382
12	USGV	8812						Dn		X				X			96	985170001004740
13	USGV	8813						Ap		X						X	72	985170000995323
14	USGV	8814		X						X						X	84	985170001028454
15	USGV	8815						Sr		X						X	60	985170000991411

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

SIGNATURE

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

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

(b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN
FRONTERAS (DGIF)

EST.

DATE

TIME

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

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

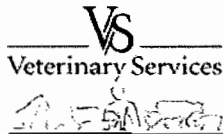
FORM
APPROVED
OMB NO.
0579-0160

T11-18311

	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	8816	x							x						x	108	985170001015808
17	USGV	8817						Sr		x						x	120	985170000993370
18	USGV	8818						Dn		x				x			96	985170000996618
19	USGV	8819						Pl		x						x	72	985170001012112
20	USGV	8820						Sr		x						x	60	985170000991633
21	USGV	8821	x							x						x	84	985170001023896
22	USGV	8822						Sr					ML	x			120	985170000989916
23	USGV	8823						Sr		x						x	84	985170000990686
24	USGV	8824	x										ML	x			60	985170000986880
25	USGV	8825						Sr					ML	x			48	985170001023293
26	USGV	8826						Pt		x						x	60	985170000987976
27	USGV	8827						Sr		x						x	60	985170001036099
28	USGV	8828	x							x				x			60	985170000991438
29	USGV	8829						Pt		x						x	72	985170001004875
30	USGV	8830						Ap		x				x			48	985170001016289
31	USGV	8831						Sr		x				x			60	905170001023060
32																		
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45																		

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

SIGNATURE OF OWNER (b)(6) [Redacted Signature] Subject to the best of my knowledge.)



Health Certificate No. T11-18312
(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)

(b)(6)

2. Name and Address of Importer:

Nombre y Dirección del Importador:

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

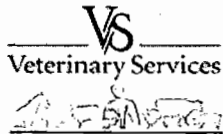
Carratera Jerez Sanchez Roman KM 27.5

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 8751 985170000988961	Gelding	72 Months	USGV 8759 985170000988913	Mare	84 Months
USGV 8752 985170001012752	Mare	108 Months	USGV 8760 985170001016445	Mare	96 Months
USGV 8753 985170000987542	Gelding	36 Months	USGV 8761 985170001045120	Mare	96 Months
USGV 8754 985170000986239	Mare	60 Months	USGV 8762 985170001015913	Mare	72 Months
USGV 8755 985170001018151	Gelding	72 Months	USGV 8763 985170000994108	Gelding	60 Months
USGV 8756 985170000992383	Mare	60 Months	USGV 8764 985170000987568	Mare	84 Months
USGV 8757 985170001026441	Mare	48 Months	USGV 8765 985170000994365	Mare	108 Months
USGV 8758 985170000989944	Mare	120 Months	USGV 8766 985170001003243	Gelding	72 Months

Mexico, Slaughter horse HC



Health Certificate No. T11-18312
(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 8767 985170000994596	Mare	64 Months	USGV 8774 985170001012192	Mare	24 Months
USGV 8768 985170001001518	Mare	72 Months	USGV 8775 985170000995043	Gelding	72 Months
USGV 8769 985170000990098	Gelding	108 Months	USGV 8776 985170000994423	Gelding	48 Months
USGV 8770 985170001029178	Mare	84 Months	USGV 8777 985170000994351	Mare	72 Months
USGV 8771 985170000989377	Mare	64 Months	USGV 8778 985170000996561	Gelding	84 Months
USGV 8772 985170000989281	Gelding	108 Months	USGV 8779 985170001009484	Mare	24 Months
USGV 8773 985170001045407	Mare	72 Months	USGV 8780 985170000993545	Gelding	72 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 4/26/11

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. T11-18312
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Page 4 of 5

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

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

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

Name of Accredited Veterinarian

Nombre del Médico Veterinario

Acreditado Denise Fowler

Name of Endorsing Federal Veterinarian

Nombre del Médico Veterinario

Federal que endosa H.L. 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 T11-18312 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 T11-18312 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.

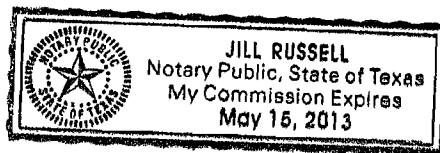
Que no fueron empleados los siguientes tirostáticos: tiouracilo, metiluracilo, feniltiuracilo y propiltiuracilo

Date and signature of the exporter

Fecha y firma del exportador

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

T11-18312

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Brookston, Texas 75421

(b)(6)

NAME OF AUCTION/MARKET

/A

CONSIGNOR (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) 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	8751	X							X						X	72	985170000988961
2	USGV	8752		X						X				X			108	985170001012752
3	USGV	8753						Sr		X						X	36	985170000987542
4	USGV	8754		X						X				X			60	985170000986239
5	USGV	8755						Pl		X						X	72	985170001018151
6	USGV	8756						Bn		X				X			60	985170000992383
7	USGV	8757						Pt		X				X			48	985170001026441
8	USGV	8758	X							X				X			120	985170000989944
9	USGV	8759		X						X				X			84	985170000988913
10	USGV	8760	X							X				X			96	985170001016445
11	USGV	8761	X							X				X			96	985170001045120
12	USGV	8762						Dn		X				X			72	985170001015913
13	USGV	8763						Pt		X						X	60	985170000994108
14	USGV	8764		X						X				X			84	985170000987568
15	USGV	8765						Bs		X				X			108	985170000994365

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

SIGNATURE

I HEREBY AUTHORIZE THE 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

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition Age Chip #
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USGV	8766						Pt		X						X	72	985170001003243
17	USGV	8767						Sr		X				X			64	985170000994596
18	USGV	8768						Sr		X				X			72	985170001001518
19	USGV	8769	x							X						X	108	985170000990098
20	USGV	8770	x							X				X			84	985170001029178
21	USGV	8771						Sr		X				X			64	985170000989377
22	USGV	8772						Sr		X						X	108	985170000989281
23	USGV	8773	x							X				X			72	985170001045407
24	USGV	8774						Sr		X				X			24	985170001012192
25	USGV	8775						Rn		X						X	72	985170000995043
26	USGV	8776						Dn		X						X	48	985170000994423
27	USGV	8777						Sr		X				X			72	985170000994351
28	USGV	8778						Sr		X						X	84	985170000996561
29	USGV	8779						Pt		X				X			24	985170001009484
30	USGV	8780	x							X						X	72	985170000993545
31	USGV	8781	x							X				X			96	985170001011144
32	USGV	8782						Pt		X				X			60	985170000990348
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SIGNATURE OF (b)(6)

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: 8101B0370

(b)(6)

Office Id: 978101

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	2.00	104.00

Total Due \$ 104.00

Remarks: 17-140's T11-18311, T11-18312

Payment Information

Nfc Id
9999999999V

Date	Amount	Payment Type	Account/Check #
29-APR-11	\$ 52.00	Money Order	3195023112
29-APR-11	\$ 52.00	Money Order	3195023103

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. T11-16861
(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:

Nombre y Dirección del Importador:

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

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
USHB 1751 985170000762287	GELDING	48 MONTHS	USHB 1752 985170000770591	GELDING	60 MONTHS
USHB 1753 985170000766412	GELDING	120 MONTHS	USHB 1754 985170000919877	GELDING	72 MONTHS
USHB 1755 985170001005843	GELDING	108 MONTHS	USHB 1756 985170001029601	GELDING	36 MONTHS
USHB 1757 985170001008394	GELDING	156 MONTHS	USHB 1758 985170001026078	GELDING	96 MONTHS
USHB 1759 985170000982527	GELDING	144 MONTHS	USHB 1760 985170001028033	GELDING	72 MONTHS
USHB 1761 985170001011431	GELDING	48 MONTHS	USHB 1762 985170000986673	MARE	108 MONTHS
USHB 1763 985170001037653	MARE	84 MONTHS	USHB 1764 985170001011900	MARE	36 MONTHS
USHB 1765 985170001027769	MARE	60 MONTHS	USHB 1766 985170001026302	MARE	144 MONTHS

4/27/11

Microchip number / Número de microchip	Sex/ Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
USHB 1767 985170000988540	MARE	120 MONTHS	USHB 1768 985170001037448	MARE	156 MONTHS
USHB 1769 985170001029567	MARE	96 MONTHS	USHB 1770 985170001013556	MARE	60 MONTHS
USHB 1771 985170001026289	MARE	120 MONTHS	USHB 1772 985170001009562	MARE	36 MONTHS
USHB 1773 985170001026306	MARE	84 MONTHS	USHB 1774 985170001026307	MARE	108 MONTHS
USHB 1775 985170001012989	MARE	24 MONTHS	USHB 1776 985170001026452	MARE	156 MONTHS
USHB 1777 985170000984163	MARE	108 MONTHS	USHB 1778 985170001027115	MARE	120 MONTHS
USHB 1779 985170001027378	MARE	72 MONTHS	USHB 1780 985170001040096	MARE	36 MONTHS
USHB 1781 985170000984977	MARE	60 MONTHS	USHB 1782 985170001039254	MARE	84 MONTHS
USHB 1783 985170001012284	MARE	120 MONTHS	USHB 1784 985170001026699	MARE	72 MONTHS



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 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.

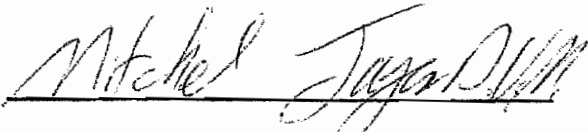
4. During 90 days prior to exportation, the animals have not been on premises where contagious equine metritis was diagnosed, neither have they been in contact with infected animals, nor epidemiologically related to infected premises or animals.

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.



Health Certificate No. T11-16861
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

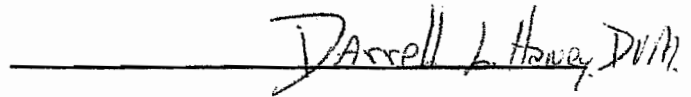
5. [The animals are free of ectoparasite and originated from areas not under quarantine for Boophilus pp ticks.]
[Los animals estan libres de ectopatasitos y provienen de areas no cuarentenadas por garrapatas Boophilus spp.]



Name of Accredited Veterinarian

Nombre del Medico Veterinario

Acreditado



Name of Endorsing Federal Veterinarian

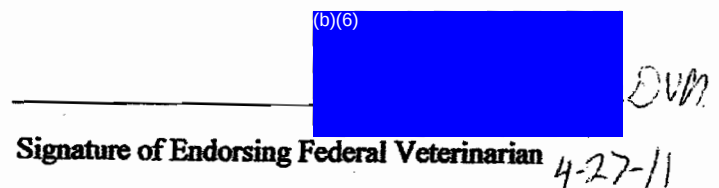
Nombre del Medico Veterinario

Federal que endosa.

(b)(6)


Firma del Medico Veterinario Acreditado

Y Fecha

(b)(6)


Signature of Endorsing Federal Veterinarian 4-27-11
and Date

Firma del Medico Veterinario que endosa

Y Fecha

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

**AFFIDAVIT
DECLARACIÓN JURADA**

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number T11-16861 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 T11-16861 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.

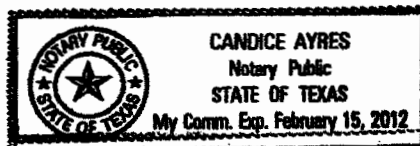
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

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 4/25/11
Fecha y firma del exportador

Date and signature of the Notary Public 4-25-11
Fecha y firma del Notario Público



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

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

FORM
APPROVED
OMB NO.
0579-0160
T11-16861

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Waco, TX
VEHICLE LICENSE NO. AND DRIVER'S NAME	NAME OF AUCTION/MARKET NA	
CONSIGNOR (OWNER/SHIPPER) NAME (b)(6)	CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.	
STREET ADDRESS (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. 011-52-8181-58-1700	

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.	REMARKS Include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USHB	1751	X							X						X	48 MONTHS	985170000762287
2	USHB	1752	X							X						X	60 MONTHS	985170000770591
3	USHB	1753	X							X						X	120 MONTHS	985170000766412
4	USHB	1754	X							X						X	72 MONTHS	985170000919877
5	USHB	1755	X							X						X	108 MONTHS	985170001005843
6	USHB	1756				X				X						X	36 MONTHS	985170001029601
7	USHB	1757					X			X						X	156 MONTHS	985170001008394
8	USHB	1758					X			X						X	96 MONTHS	985170001026078
9	USHB	1759					X			X						X	144 MONTHS	985170000982527
10	USHB	1760					X			X						X	72 MONTHS	985170001028033
11	USHB	1761					X			X						X	48 MONTHS	985170001011431
12	USHB	1762	X							X				X			108 MONTHS	985170000986673
13	USHB	1763	X							X				X			84 MONTHS	985170001037653
14	USHB	1764	X							X				X			36 MONTHS	985170001011900
15	USHB	1765	X							X				X			60 MONTHS	985170001027769

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

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).

The information contained in this form is true and correct to

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____
DATE _____
TIME _____

DIRECCION GENERAL DE INSPECCION EN
FRONTERAS (DGIF)

EST. _____
DATE _____
TIME _____

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
T11-16861

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chesin	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USHB	1766		X						X				X			144 MONTHS	985170001026302
17	USHB	1767		X						X				X			120 MONTHS	985170000988540
18	USHB	1768		X						X				X			156 MONTHS	985170001037448
19	USHB	1769			X					X				X			96 MONTHS	985170001029567
20	USHB	1770			X					X				X			60 MONTHS	985170001013556
21	USHB	1771				X				X				X			120 MONTHS	985170001026289
22	USHB	1772				X				X				X			36 MONTHS	985170001009562
23	USHB	1773					X			X				X			84 MONTHS	985170001026306
24	USHB	1774					X			X				X			108 MONTHS	985170001026307
25	USHB	1775					X			X				X			24 MONTHS	985170001012989
26	USHB	1776					X			X				X			156 MONTHS	985170001026452
27	USHB	1777					X			X				X			108 MONTHS	985170000984163
28	USHB	1778					X			X				X			120 MONTHS	985170001027115
29	USHB	1779					X			X				X			72 MONTHS	985170001027378
30	USHB	1780						X		X				X			36 MONTHS	985170001040096
31	USHB	1781						X		X				X			60 MONTHS	985170000984977
32	USHB	1782						X		X				X			84 MONTHS	985170001039254
33	USHB	1783						X		X				X			120 MONTHS	985170001012284
34	USHB	1784						X			X			X			72 MONTHS	985170001026699
35																		
36																		
37																		
38																		
39																		
40																		
41																		
42																		
43																		
44																		
45																		

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

(b)(6)

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

WESTERN UNION MONEY ORDER

WESTERN UNION FINANCIAL SERVICES INC. - ISSUER
Englewood, Colorado

Payable at Wells Fargo Bank Grand Junction - Downtown, N.A. Grand Junction, Colorado



A 603690 D 042511
T 2350 18
142420748423 L 001323

14-242074842

\$ 52.00

PAY EXACTLY FIFTY-TWO DOLLARS AND NO CENTS

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

(b)(6)

(b)(6)

(b)(6)

⑆102100400⑆ 40142420748423⑈

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

Originating Office Phone

Control Number: 850110134

Office Id: 978501

(b)(6)

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	1759785177 0250	52.00	1.00	52.00

Total Due \$ 52.00

Remarks: 1-HEALTH CERT.# T-11 16861,34 HORSES (4-27-11)

Payment Information

Nfc Id
9999999999V

Date	Amount	Payment Type	Account/Check #
29-APR-11	\$ 52.00	Money Order	14-242074842

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. 711-19133
(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.

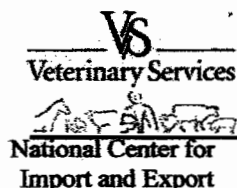
1. Name and Address of Exporter: Beltex Corporation
Nombre y Dirección del Exportador: 3801 N Grove
Fort Worth, Texas 76106
2. Name and Address of Importer: Empacadora de Carnes de Fresnillo, SA de CV
Nombre y Dirección del Importador: Avenida Plateros #480, Zona Centro
Fresnillo, Zacatecas
Mexico, C.P. 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>
097541	mare	144months	100545	gelding	120months
102553	mare	108months	062009	mare	60months
054302	mare	132months	092119	mare	96months
041428	mare	120months	085818	gelding	144months
062628	mare	120months	086426	mare	72months
060283	mare	144months	041620	mare	36months
098598	gelding	144months	052374	mare	36months
040192	mare	120months	056147	gelding	120months

Mexico, Slaughter horse HC

4801B9725

4/26/11



Health Certificate No. 711-19133
(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
059033	mare	108months	092553	mare	132months
062502	gelding	108months	083448	mare	144months
082475	mare	120months	091129	mare	144months
061116	gelding	48months	089188	mare	144months
059074	gelding	108months	051942	gelding	144months
060186	mare	60months	280532	mare	84months
280545	mare	144months	280555	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 April 22, 2011

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

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

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

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

Mexico, Slaughter horse HC

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)

4-22-11

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

(b)(6)

4/26/11

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 T11-19133 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 T11-19133 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

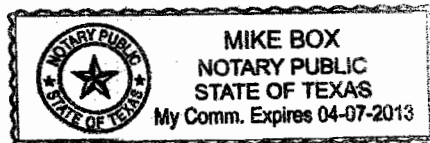
(b)(6)

4/22/2011

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

(b)(6)

4/22/2011



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

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

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

FORM
APPROVED
OMB NO.
0579-0160
T11-19133

TIME HORSES LOADED ON CONVEYANCE (b)(6)	DATE 11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Morton Texas
		NAME OF AUCTION/MARKET
Better Feedlot		CONSIGNEE (RECEIVER/DESTINATION) NAME T.D.A. Pens
STREET ADDRESS 2180 C.R. 120		STREET ADDRESS 10300 Socorro Rd
CITY, STATE, ZIP CODE Morton IL		CITY, STATE, ZIP CODE E. Paso, IL
AREA CODE & TELEPHONE NO. (800) 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

- ☒ 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	7503				✓							✓	✓				A ^{RT} ₂₄₄	097541
2		7504					✓						✓			✓			100545
3		7505	✓										✓	✓					102553
4		7508						DUN					✓	✓					062009
5		7509						APP					✓	✓					054302
6		7510						APP					✓	✓					092119
7		7511					✓						✓	✓					041428
8		7512					✓						✓			✓			085818
9		7513	✓										✓	✓					062628
10		7515					✓						✓	✓					086426
11		7516					✓						✓	✓					060283
12		7517				✓							✓	✓					041620
13		7518					✓						✓			✓			098598
14		7519	✓										✓	✓					052374
15	USGT	7520					✓						✓	✓				A ^{RT} ₂₄₄	040192

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 CONTAINED IN THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. (b)(6)

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

711-19133

	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	1521	✓									✓			✓	A 7/14	056147	
17		1522	✓									✓	✓				059033	
18		1523					DUN					✓	✓				092553	
19		1525	✓									✓			✓		062502	
20		1526					DUN					✓	✓				083448	
21		1527					✓					✓	✓				082475	
22		1528					✓					✓	✓				091129	
23		1529					✓					✓			✓		061116	
24		1530	✓									✓	✓				089188	
25		1531					✓					✓			✓		059074	
26		1532				✓						✓			✓	051942		
27		1533										✓	✓			060186		
28		1534				✓						✓	✓			280531		
29		1535										✓	✓			280545		
30	USGT	1537	✓									✓	✓			A 7/14	280555	
31																		
32																		
33																		
34																		
35																		
36																		
37																		
38																		
39																		
40																		
41																		
42																		
43																		
44																		
45																		

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

SIGNATURE (b)(6)

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

VS FOR
(SEP 20

Printing Office: 2004-616-624/99766

PAGE 2 OF 2



Health Certificate No. 711-19134
(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
286872	mare	72months	286866	gelding	84months
287007	gelding	96months	286886	gelding	36months
286845	mare	84months	286880	gelding	72months
286842	mare	72months	286837	mare	120months
286899	mare	60months	286850	gelding	84months
286957	mare	144months	286862	gelding	96months
286844	gelding	84months	286848	mare	96months
282066	mare	144months	282037	gelding	120months

Mexico, Slaughter horse HC



Health Certificate No. 711-19134
 (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
282078	mare	144months	282085	mare	120months
282079	gelding	144months	282065	gelding	144months
282053	mare	180months	282107	mare	96months
281385	gelding	96months	281372	gelding	60months
281384	gelding	72months	282150	gelding	120months
282058	mare	96months	282043	mare	96months
282137	mare	96months	282064	mare	120months
282060	mare	96months			
Total: 31hd					

Mexico, Slaughter house HC



Health Certificate No. T11-19134
 (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

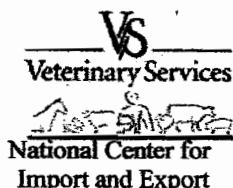
CERTIFICATION STATEMENTS / CERTIFICACIONES

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.



Health Certificate No. 711-19134
 (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)



4-25-11

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

(b)(6)



4/26/11

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)} [redacted] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 711-19134 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 711-19134 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

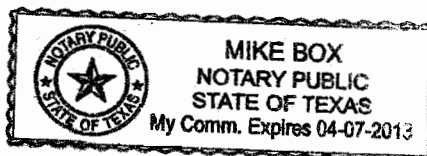
^{(b)(6)} [redacted]

4/25/2011

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

^{(b)(6)} [redacted]

4/25/2011



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

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

Pen 9
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

711-19134

(b)(6)

DATE

4-26-11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Morton Texas

NAME OF AUCTION/MARKET

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

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

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	7670				✓							✓	✓			286872	
2	7662	✓										✓			✓	286866	
3	7663						BLN					✓			✓	287007	
4	7969						BLN					✓			✓	286886	
5	7665						ROAN					✓	✓			286845	
6	7666					✓						✓			✓	286880	
7	7669						APP					✓	✓			286842	
8	7670					✓						✓	✓			286837	
9	7671	✓										✓	✓			286899	
10	7672					✓						✓			✓	286850	
11	7674				✓							✓	✓			286957	
12	7675		✓									✓			✓	286862	
13	7676						APP					✓			✓	286844	
14	7677	✓										✓	✓			286848	
15	7678				✓							✓	✓			282066	

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

SIGNATURE

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. ANY FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

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

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

711-19134

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			
EST	7680					✓						✓				✓	Art. pup	282037
	7682					✓						✓	✓					282078
	7683					✓						✓	✓					282085
	7684			✓		✓						✓				✓		282079
	7687					✓						✓				✓		282065
	7689					✓						✓	✓					282053
	7690					✓						✓	✓					282107
	7692		✓			✓						✓				✓		281385
	7693					✓						✓				✓		281372
	7694					✓						✓				✓		281384
	7695					✓						✓				✓		282150
	7696					✓						✓	✓					282058
	7698					✓						✓	✓					282043
	7701					✓						✓	✓					282137
	7704					✓						✓	✓					282064
EST	7706					✓						✓	✓				Art. pup	282060
32																		
33																		
34																		
35																		
36																		
37																		
38																		
39																		
40																		
41																		
42																		
43																		
44																		
45																		

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

(b)(6)

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



Health Certificate No. 711-19135
(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
263130	mare	144months	307885	gelding	120months
309188	mare	84months	251290	mare	144months
303919	mare	72months	304633	mare	36months
302164	mare	36months	298240	mare	36months
255410	mare	120months	260835	gelding	144months
301282	mare	120months	301578	gelding	144months
258858	gelding	144months	240559	mare	96months
311331	mare	36months	241730	mare	48months

Mexico, Slaughter horse HC



Health Certificate No. 711-19135
(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
253101	gelding	120months	311621	mare	36months
243470	mare	132months	253347	gelding	120months
308623	mare	108months	247050	mare	24months
245308	gelding	120months	257486	gelding	72months
304870	mare	144months	299646	mare	24months
299696	mare	24months	286834	mare	72months
286974	gelding	84months	286855	mare	48months
286919	mare	48months	286838	mare	60months
286883	gelding	84months	286990	mare	84months
060942	mare	96months			
Total:35hd					

Mexico, Slaughter horse HC



Health Certificate No. 711-19135
 (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.



Health Certificate No. 711-19135
(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)

4/26/11

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) Bel Hex Corp declare that the horses included in this shipment and accompanied by the health certificate number 711-19135 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 711-19135 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



OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(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

711-19135

TIME HORSES LOADED ON CONVEYANCE: DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

(b)(6)

Morton Texas

CONSIGNOR (OWNER/SHIPPER) NAME

ONSIGNEE (RECEIVER/DESTINATION) NAME

Beltz Feedlot

T.D.A. Pens

STREET ADDRESS

STREET ADDRESS

2180 C.R. 120

10800 Socorro Rd

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

Morton, TX

El Paso, TX

AREA CODE & TELEPHONE NO.

AREA CODE & TELEPHONE NO.

(806) 525-4221

(915) 859-3942

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

- ☒ Pregnant mares are not likely to foal (give birth) during the trip. ☒ Horses are able to bear weight on all 4 limbs. ☒ 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	7571	✓										✓	✓			263130	
2		7573					✓						✓			✓	307885	
3		7574			✓								✓	✓			309188	
4		7575					✓						✓	✓			251290	
5		7576						APP					✓	✓			303919	
6		7577					✓						✓	✓			304633	
7		7578						APP					✓	✓			302164	
8		7579	✓										✓	✓			298240	
9		7581						DUN					✓	✓			255410	
10		7582		✓									✓			✓	260835	
11		7583					✓						✓	✓			301282	
12		7584					✓						✓			✓	301578	
13		7585					✓						✓			✓	258858	
14		7586						APP					✓	✓			240559	
15	USGT	7587				✓							✓	✓			311331	

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

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN
FRONTERAS (DGIF)

EST.

DATE

TIME

SIGNATURE

I HEREBY CERTIFY THAT THE INFORMATION IN IT AS
COMPILED BY ME OR BY ANY OTHER PERSON 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
the

This form is true and correct to

3204

VS. (b)(6) are obsolete

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

(Please type or print in ink)

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

FORM
APPROVED
OMB NO.
0579-0160

711-19135

	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	7588					✓						✓	✓				A st 24	241730
17		7589					✓						✓			✓			253101
18		7590					✓						✓	✓					311621
19		7591					✓						✓	✓					243470
20		7592	✓										✓			✓			253347
21		7593					✓						✓	✓					308623
22		7594					✓						✓	✓					247050
23		7595				✓							✓			✓			245308
24		7596		✓									✓			✓			257486
25		7597					✓						✓	✓					304870
26		7968	✓										✓	✓					299646
27		7967					✓						✓	✓					299696
28		7653	✓										✓	✓					286834
29		7654					✓						✓			✓			286974
30		7655						PAL					✓	✓					286855
31		7656	✓										✓	✓					286919
32		7657	✓										✓	✓					286838
33		7658						BRN					✓			✓			286883
34		7659					✓						✓	✓					286990
35	USGT	7662	✓										✓	✓				A st 24	060942
36																			
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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).

SIGN (b)(6)

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

VS F
(SEP 2002)

Printing Office: 2004-616-624/99766

PAGE 2 OF 2

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: 4801B9725

Office Id: 974801

Service Date(s)

Begin: 26-APR-11

End: 26-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 # T1119133, 9134, 9135

Payment Information

Nfc Id
751522503VA

Date	Amount	Payment Type	Account/Check #
01-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. T11-16862
(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
280664	gelding	96months	280678	mare	60months
280525	mare	96months	280703	gelding	120months
280704	mare	132months	280673	mare	96months
280640	mare	60months	280601	mare	96months
280740	gelding	60months	280612	mare	120months
060487	mare	108months	280651	mare	72months
094005	mare	120months	280523	gelding	60months
058603	mare	96months	280709	gelding	144months

Mexico, Slaughter horse HC

4/26/11



Health Certificate No. T11-16862
(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 aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>
280694	gelding	84months	280714	mare	84months
041711	mare	60months	280679	gelding	84months
280738	mare	72months	280530	mare	60months
280674	mare	84months	280723	gelding	96months
280595	mare	96months	280707	mare	120months
082026	mare	180months	280606	mare	96months
280648	gelding	84months	082466	mare	120months

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

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

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

Inspection date / *Fecha de inspección* _____

3. 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. T11-16862
(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
280692	gelding	108months	280570	mare	84months
280617	gelding	120months	280665	gelding	132months
280696	mare	120months			
Total:35hd					

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.



Health Certificate No. T11-16862
(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*

Darrell L. Hawley, DVM

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 (print (b)(6)) Bettex Corp declare that the horses included in this shipment and accompanied by the health certificate number _____ 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 _____ 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



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

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

FORM
APPROVED
OMB NO.
0579-0160

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

VEHICLE LICENSE NO. AND DRIVER'S NAME

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	1107					✓						✓				✓	280664
2	1109						✓					✓	✓				280678
3	1112					✓						✓	✓				280525
4	1113					✓						✓			✓		280703
5	1115				✓							✓	✓				280704
6	1116					✓						✓	✓				280673
7	1117					✓						✓	✓				280640
8	1118	✓										✓	✓				280601
9	1119	✓										✓			✓		280740
10	1120					✓						✓	✓				280612
11	1121	✓										✓	✓				106087
12	1122				✓							✓	✓				280651
13	1123	✓										✓	✓				094005
14	1124	✓										✓			✓		280523
15	1125				✓							✓	✓				058603

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE 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 OWNER/SHIPPER/Consignor that the information contained in this form is true and correct to the best of their 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

	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	7729						APP					✓			✓	144Mo	280709
17		7730				✓							✓			✓	84Mo	280694
18		7731	✓										✓	✓			84Mo	280714
19		7732					✓						✓	✓			60Mo	041711
20		7733				✓							✓			✓	84Mo	280619
21		7734	✓										✓	✓			72Mo	280738
22		7735				✓							✓	✓			60Mo	280530
23		7736					✓						✓	✓			84Mo	280674
24		7737						DUN					✓			✓	96Mo	280723
25		7738				✓							✓	✓			96Mo	280595
26		7739	✓										✓	✓			120Mo	280707
27		7740						PAL					✓	✓			180Mo	082026
28		7741			✓								✓	✓			96Mo	280606
29		7742					✓						✓			✓	84Mo	280648
30		7743					✓						✓	✓			120Mo	082466
31		7748					✓						✓			✓	108Mo	280692
32		7769				✓							✓	✓			84Mo	280570
33		7770					✓						✓			✓	120Mo	280617
34		7771	✓										✓			✓	132Mo	280665
35	USGT	7772						PAL					✓	✓			120Mo	280696
36																		
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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 IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR (S.C. SECTION 1001).

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

7 2



Health Certificate No. T11-16863
(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
280619	gelding	132months	280711	gelding	108months
280655	mare	84months	280666	mare	108months
099379	gelding	144months	280614	mare	120months
280676	gelding	84months	280708	mare	156months
280634	gelding	120months	280524	mare	108months
280596	mare	72months	100718	gelding	96months
047652	mare	84months	280689	mare	84months
280600	gelding	120months	280605	gelding	108months

Mexico, Slaughter horse HC



Health Certificate No. T11-16863
(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
280623	gelding	120months	280654	mare	120months
280716	mare	108months	280610	mare	120months
091486	mare	132months	280658	mare	108months
282035	mare	36months	282025	mare	48months
096166	mare	96months	281973	mare	120months
058147	mare	48months	281158	mare	24months
281969	mare	120months	281948	mare	48months

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

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

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

Inspection date / Fecha de inspección _____

3. 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. T11-16863
(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
059931	gelding	96months	051857	mare	120months
282010	gelding	120months	281754	mare	120months
281975	mare	108months			
Total:35hd					

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. T11-16863
 (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

Parrell L. Honey, 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)

4-26-11
 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)} [redacted] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number _____ 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 _____ 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

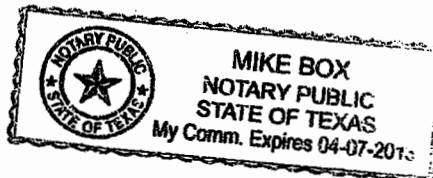
^{(b)(6)} [redacted]

4/25/2011

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

^{(b)(6)} [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

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE <u>Morton Texas</u>
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET
CONSIGNOR (OWNER/SHIPPER) NAME <u>Betty Seedlot</u>		CONSIGNEE (RECEIVER/DESTINATION) NAME <u>TDA Pens</u>
STREET ADDRESS <u>2180 CR 120</u>		STREET ADDRESS <u>205 Industrial Blvd</u>
CITY, STATE, ZIP CODE <u>Morton Texas 79346</u>		CITY, STATE, ZIP CODE <u>Eagle Pass, Texas 78852</u>
AREA CODE & TELEPHONE NO. <u>(806) 525-4221</u>		AREA CODE & TELEPHONE NO. <u>(836) 773-2359</u>

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	U56T	7744						BEW					✓			✓	120 HO	280619
2		7745						✓					✓			✓	120 HO	280711
3		7746						BEW					✓	✓			120 HO	280655
4		7748						BEW					✓	✓			100 HO	280666
5		7749						Roan					✓			✓	140 HO	099379
6		7750	✓										✓	✓			120 HO	280614
7		7751	✓										✓			✓	80 HO	280676
8		7752				✓							✓	✓			150 HO	280708
9		7753						✓					✓			✓	120 HO	280634
10		7754						BEW					✓	✓			100 HO	280524
11		7755						✓					✓	✓			120 HO	280596
12		7756						BEW					✓			✓	90 HO	100718
13		7757			✓								✓	✓			80 HO	047652
14		7759			✓								✓	✓			80 HO	280689
15	U56T	7760	✓										✓			✓	120 HO	280600

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

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

	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	WEST	1161					✓					✓				✓	108 HO	280605
17		1162				✓						✓					120 HO	280623
18		1163					✓					✓	✓				120 HO	280634
19		1164					✓					✓	✓				108 HO	280716
20		1165					✓					✓	✓				120 HO	280610
21		1166			✓							✓	✓				132 HO	091486
22		1113				✓						✓	✓				108 HO	280658
23		1114	✓									✓	✓				36 HO	282035
24		1115					✓					✓	✓				48 HO	282025
25		1116	✓									✓	✓				96 HO	096166
26		1117	✓									✓	✓				120 HO	281973
27		1118	✓									✓	✓				48 HO	1058147
28		1119	✓									✓	✓				24 HO	281158
29		1180										✓	✓				120 HO	281969
30		1181	✓									✓	✓				48 HO	281948
31		1182				✓						✓	✓			✓	96 HO	059931
32		1183	✓									✓	✓				120 HO	051857
33		1184					✓					✓	✓			✓	120 HO	282010
34		1185					✓					✓	✓				120 HO	281754
35	WEST	1186					✓					✓	✓				108 HO	281975
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).

S(b)(6)

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

V
(SEP 2002)

ing Office: 2004-616-624/99766

PAGE 2 OF 2

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

Originating Office Phone

Control Number: 850110135

Office Id: 978501

Beltex Corporation
3801 N. Grove
Ft. Worth TX 76106

Service Date(s)
Begin: 26-APR-11
End: 26-APR-11

Reference NR:

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

Total Due \$ 104.00

Remarks: 1-HEALTH CERT.# T11-16862,35 HEAD HORSES (4-26-11)
1-HEALTH CERT.# T11-16863,35 HEAD HORSES(4-26-11)

Payment Information

Nfc Id 751522503VA

Date	Amount	Payment Type	Account/Check #
29-APR-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.



Health Certificate No. T11-16860
(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) TX (b)(6)

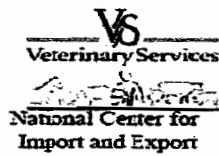
2. Name and Address of Importer:

Nombre y Dirección del Importador: Carnicos de Jerez, S.A. de C.V.
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
USFV 1051 985170001010865	GELDING	60 MONTHS	USFV 1052 985170001002779	MARE	84 MONTHS
USFV 1053 985170001028057	MARE	132 MONTHS	USFV 1054 985170001028747	MARE	48 MONTHS
USFV 1055 985170001012086	MARE	96 MONTHS	USFV 1056 985170001029449	GELDING	48 MONTHS
USFV 1057 985170001010851	MARE	60 MONTHS	USFV 1058 985170001017751	MARE	96 MONTHS
USFV 1059 985170001028577	MARE	132 MONTHS	USFV 1060 985170001027629	GELDING	24 MONTHS
USFV 1061 985170001047848	MARE	72 MONTHS	USFV 1062 985170001028709	GELDING	108 MONTHS
USFV 1063 985170000993830	MARE	156 MONTHS	USFV 1064 985170001010543	MARE	96 MONTHS
USFV 1065 985170001024909	MARE	36 MONTHS	USFV 1066 985170001022735	GELDING	84 MONTHS

1261



Health Certificate No. T11-16860
(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
USFV 1067 985170001044763	MARE	60 MONTHS	USFV 1068 985170000994936	MARE	144 MONTHS
USFV 1069 985170000991315	MARE	72 MONTHS	USFV 1070 985170001011917	MARE	108 MONTHS
USFV 1071 985170001028521	MARE	48 MONTHS	USFV 1072 985170001013709	MARE	120 MONTHS
USFV 1073 985170001028598	MARE	60 MONTHS	USFV 1074 985170001005766	GELDING	96 MONTHS
USFV 1075 985170001037776	MARE	24 MONTHS	USFV 1076 985170000987320	GELDING	144 MONTHS
USFV 1077 985170000983430	MARE	96 MONTHS	USFV 1078 985170001012369	GELDING	48 MONTHS
USFV 1079 985170000984747	GELDING	72 MONTHS	USFV 1080 985170000984502	MARE	132 MONTHS
USFV 1081 985170001009925	MARE	84 MONTHS	USFV 1082 985170001037377	MARE	60 MONTHS
USFV 1083 985170000982438	MARE	108 MONTHS			



Health Certificate No. **T11-16860**
(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 04/25/2011

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.



Health Certificate No. T11-16860
(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.]

Name of Accredited Veterinarian
Nombre del Medico Veterinario
Acreditado

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

1-25-11

(b)(6)

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

4-26-11

(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 T11-16860 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 T11-16860 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.

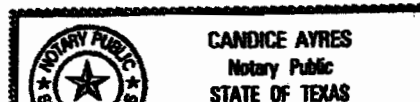
Los siguientes compuestos no se usaron como promotores del crecimiento: zilpaterol, clenbuterol, raptopamine, así como esteroides anabólicos.

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 4/25/11 (b)(6)
Fecha y firma del exportador

Date and signature of the Notary Public (b)(6) 4-25-11
Fecha y firma del Notario Público



TIME HORSES LOADED ON CONVEYANCE	DATE 04/25/2011	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Waco, TX
VEHICLE LICENSE NO. AND DRIVER'S NAME		NAME OF AUCTION/MARKET NA
CONSIGNOR (OWNER/SHIPPER) NAME (b)(6)		CONSIGNEE (RECEIVER/DESTINATION) NAME Carnicos de Jerez, S.A. de C.V.
STREET ADDRESS (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. 011-52-8181-58-1700

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.	REMARKS Include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USFV	1051					X			X						X	60 MONTHS	985170001010865
2	USFV	1052					X			X				X			84 MONTHS	985170001002779
3	USFV	1053					X			X				X			132 MONTHS	985170001028057
4	USFV	1054					X			X				X			48 MONTHS	985170001028747
5	USFV	1055		X						X				X			96 MONTHS	985170001012086
6	USFV	1056					X			X						X	48 MONTHS	985170001029449
7	USFV	1057					X			X				X			60 MONTHS	985170001010851
8	USFV	1058					X			X				X			96 MONTHS	985170001017751
9	USFV	1059					X			X				X			132 MONTHS	985170001028577
10	USFV	1060						X		X						X	24 MONTHS	985170001027629
11	USFV	1061					X			X				X			72 MONTHS	985170001047848
12	USFV	1062		X						X						X	108 MONTHS	985170001028709
13	USFV	1063		X						X				X			156 MONTHS	985170000993830
14	USFV	1064					X			X				X			96 MONTHS	985170001010543
15	USFV	1065		X						X				X			36 MONTHS	985170001024909

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

(b)(6)

THE EXPORTER KNOWS 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).

(b)(6) (I certify that the information contained in this form is true and correct to

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST. _____

DATE _____

TIME _____

DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)

EST. _____

DATE _____

TIME _____

(CONTINUATION SHEET)

(Please type or print in ink)

instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

	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	USFV	1066					X			X						X	84 MONTHS	985170001022735
17	USFV	1067					X			X				X			60 MONTHS	985170001044763
18	USFV	1068					X			X				X			144 MONTHS	985170000994936
19	USFV	1069			X					X				X			72 MONTHS	985170000991315
20	USFV	1070		X						X				X			108 MONTHS	985170001011917
21	USFV	1071		X						X				X			48 MONTHS	985170001028521
22	USFV	1072					X			X				X			120 MONTHS	985170001013709
23	USFV	1073				X				X				X			60 MONTHS	985170001028598
24	USFV	1074						X		X						X	96 MONTHS	985170001005766
25	USFV	1075					X			X				X			24 MONTHS	985170001037776
26	USFV	1076	X							X						X	144 MONTHS	985170000987320
27	USFV	1077				X				X				X			96 MONTHS	985170000983430
28	USFV	1078					X			X						X	48 MONTHS	985170001012369
29	USFV	1079	X							X						X	72 MONTHS	985170000984747
30	USFV	1080					X			X				X			132 MONTHS	985170000984502
31	USFV	1081	X							X				X			84 MONTHS	985170001009925
32	USFV	1082					X			X				X			60 MONTHS	985170001037377
33	USFV	1083		X						X				X			108 MONTHS	985170000982438
34																		
35																		
36																		
37																		
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39																		
40																		
41																		
42																		
43																		
44																		
45																		

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

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

WESTERN UNION MONEY ORDER

THIS DOCUMENT CONTAINS A TRUE WATERMARK. TRIPLE UP TO EIGHT TO REVEAL

WESTERN UNION FINANCIAL SERVICES INC. - ISSUER
Englewood, Colorado

Payable at Wells Fargo Bank Grand Junction - Downtown, N.A., Grand Junction, Colorado



14-242074843

A 603690 D 042511
T 2350 18
142420748432 L 001323

\$ 52.00

PAY EXACTLY FIFTY-TWO DOLLARS AND NO CENTS

PAY TO THE ORDER OF

(b)(6)

(b)(6)

⑆102100400⑆ 40142420748432⑈

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

Originating Office Phone

Control Number: 850110132



Office Id: 978501

Service Date(s)
Begin: 26-APR-11
End: 26-APR-11

Reference NR:

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

Total Due \$ 52.00

Remarks: 1-HEALTH CERT.# T-11-16860,33 HORSES(4-26-11)

Payment Information

Nfc Id 9999999999v

Date	Amount	Payment Type	Account/Check #
29-APR-11	\$ 52.00	Money Order	14-242074843

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. T11-16859
(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/ <i>Edad aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / Sexo	Approximate age/ <i>Edad aproximada</i>
050735	mare	84months	085613	mare	120months
051255	mare	84months	087528	mare	108months
081990	mare	120months	086660	mare	120months
259817	gelding	36months	248639	mare	36months
239753	mare	48months	244987	gelding	144months
258079	gelding	132months	236613	gelding	144months
249143	gelding	144months	252197	mare	144months
550814	gelding	144months	280608	mare	84months

Mexico, Slaughter horse HC

4/25/11



Health Certificate No. T11-16859
(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
280720	mare	36months	280653	mare	84months
280754	mare	36months	280604	gelding	144months
280630	mare	24months	280727	mare	132months
280642	mare	120months	281078	mare	108months
280718	mare	96months	280635	mare	120months
280710	mare	120months	280638	gelding	72months
280747	mare	108months	280729	gelding	36months

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

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

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

Inspection date / Fecha de inspección _____

3. 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. T11-16859
(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
280637	gelding	120months	088878	gelding	144months
280744	mare	144months	280737	gelding	96months
280717	mare	84months			
Total:35hd					

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 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.

Mexico, Slaughter horse HC



Health Certificate No. T11-16859
(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

Darrell H. Heng, 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

(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).

AFFIDAVIT
DECLARACIÓN JURADA

I (principal) (b)(6) Beitex Corp declare that the horses included (b)(6) accompanied by the health certificate number 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 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, colchicina, 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, metihuracilo, feniltiuracilo y propiltiuracilo.

Date and signature of the export
Fecha y firma del exportador

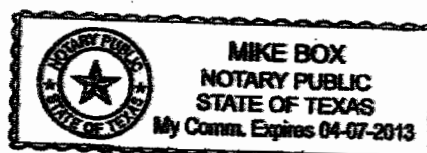
(b)(6)

4/19/2011

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

(b)(6)

4/19/2011



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

TIME HORSES LOADED ON CONVEYANCE 11:30	DATE 4/24/11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Morton Texas
NAME OF AUCTION/MARKET		CONSIGNEE (RECEIVER/DESTINATION) NAME Eagle Pass Pers
STREET ADDRESS 2190 C.R. 120		STREET ADDRESS 205 Industrial Blvd.
CITY, STATE, ZIP CODE Morton, TX 79346		CITY, STATE, ZIP CODE Eagle Pass, TX 78852
AREA CODE & TELEPHONE NO. (906) 525-4221		AREA CODE & TELEPHONE NO. (830) 773-2359

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	Stall	Geid		
1	USGT	7285				✓							✓	✓			84MD	050735
2		7286					✓						✓	✓			120MD	085613
3		7287				✓							✓	✓			84MD	051255
4		7288					✓						✓	✓			108MD	087528
5		7289					✓						✓	✓			120MD	081990
6		7291					✓						✓	✓			120MD	086660
7		7292					✓						✓		✓		76MD	259817
8		7293					✓						✓	✓			76MD	248639
9		7294						Rean					✓	✓			148MD	239753
10		7295	✓										✓		✓		144MD	244987
11		7296	✓										✓		✓		132MD	258079
12		7297	✓										✓		✓		144MD	236613
13		7298	✓										✓		✓		144MD	249143
14		7299			✓								✓	✓			144MD	252197
15	USGT	7300					✓						✓		✓		144MD	550814

HORSES HAVE HAD ACCESS TO FOOD, WATER, AND REST FOR A MINIMUM OF 6 CONSECUTIVE HOURS	SIGNATURE	CANADIAN FOOD INSPECTION AGENCY (CFIA) EST. _____ DATE _____ TIME _____ DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF) 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).		
SK the information contained in this form is true and correct to		

Drawings, markings, and photos

PAGE 1 OF 1

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, the persons who are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0160. The time required to complete this information collection is estimated to average 5 min. per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

FORM
APPROVED
OMB NO.
0579-0160

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE						SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld			
16	USGT	7301						APP					✓	✓			84MD	280608	
17		7302	✓										✓	✓			76MD	280730	
18		7303						PAL					✓	✓			84MD	280653	
19		7304					✓						✓	✓			36MD	280754	
20		7305					✓						✓		✓		144MD	280604	
21		7307					✓						✓	✓			24MD	280630	
22		7308			✓								✓	✓			132MD	280727	
23		7310				✓							✓	✓			120MD	280642	
24		7311					✓						✓	✓			108MD	281078	
25		7312				✓							✓	✓			96MD	280718	
26		7313					✓						✓	✓			120MD	280635	
27		7314	✓										✓	✓			120MD	280710	
28		7316						PAL					✓		✓		72MD	280638	
29		7318	✓										✓	✓			108MD	280747	
30		7319					✓						✓		✓		36MD	280729	
31		7320						Back					✓		✓		120MD	280637	
32		7321	✓										✓		✓		144MD	098978	
33		7322		✓									✓	✓			144MD	280744	
34		7323	✓										✓		✓		96MD	280737	
35	USGT	7324		✓									✓	✓			84MD	280717	
36																			
37																			
38																			
39																			
40																			
41																			
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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).

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



Health Certificate No. T11-16858
(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
340782	gelding	120months	355512	mare	48months
340663	mare	120months	355272	gelding	96months
329602	gelding	84months	333087	gelding	96months
340408	mare	144months	329941	mare	96months
335717	mare	120months	088189	gelding	144months
356776	mare	144months	102434	mare	96months
074509	mare	96months	095081	mare	120months
045538	mare	108months	086601	mare	120months

Mexico, Slaughter horse HC



Health Certificate No. T11-16858
(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
083570	mare	108months	105103	mare	96months
104258	mare	72months	100156	mare	120months
075318	mare	72months	054135	mare	120months
094939	gelding	120months	098092	mare	60months
052266	gelding	120months	083455	gelding	120months
090658	mare	120months	053888	mare	84months
048923	mare	120months	090887	mare	72months

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

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

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

Inspection date / Fecha de inspección _____

3. 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. T11-16858
(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
054876	gelding	132months	052548	mare	120months
088625	mare	120months	051411	mare	132months
092628	gelding	144months			
Total:35hd					

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 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.

Mexico, Slaughter horse HC



Health Certificate No. T11-16858
(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*

Darrell L. Haney, DVM.
Name of Endorsing Federal Veterinarian
*Nombre del Médico Veterinario
Federal que endosa.*

(b)(6)
[Redacted]
4-19-11
Signature of Accredited Veterinarian and Date
*Firma del Médico Veterinario Acreditado
y Fecha*

(b)(6)
[Redacted]
4-25-11
Signature of Endorsing Federal Veterinarian and Date
*Firma del Médico Veterinario que endosa
y Fecha*

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

**AFFIDAVIT
DECLARACIÓN JURADA**

I (print) ^{(b)(6)} [REDACTED] Beltex Corp declare that the horses included in this shipment accompanied by the health certificate number _____ 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 _____ no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

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

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

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

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

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

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

Date and signature of the exporter
Fecha y firma del exportador

^{(b)(6)} [REDACTED]

4/19/2011

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

^{(b)(6)} [REDACTED]

4/19/2011



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

TIME HORSES LOADED ON CONVEYANCE	DATE	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
VEHICLE LICENSE NO. AND DRIVER'S NAME		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	7244	✓										✓			✓	120Mo	340782
2		7245						Roan					✓	✓			48Mo	355512
3		7246					✓						✓	✓			120Mo	340663
4		7247					✓						✓			✓	96Mo	355272
5		7248					✓						✓			✓	84Mo	329602
6		7249					✓						✓			✓	96Mo	333087
7		7250	✓										✓	✓			144Mo	340408
8		7251	✓										✓	✓			96Mo	329941
9		7252						Roan					✓	✓			120Mo	335717
10		7253						Blk					✓			✓	144Mo	088189
11		7254			✓								✓	✓			144Mo	356776
12		7257			✓								✓	✓			96Mo	102434
13		7258			✓								✓	✓			96Mo	074509
14		7259					✓						✓	✓			120Mo	095081
15	USGT	7260						Roan					✓	✓			105Mo	045538

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

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 _____

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

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

FORM
APPROVED
OMB NO.
0579-0160

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
16	USET	7261			✓								✓	✓			120 Mo	086601
17		7262			✓								✓	✓			104 Mo	083570
18		7263			✓								✓	✓			96 Mo	105103
19		7264	✓										✓	✓			72 Mo	104258
20		7265			✓								✓	✓			110 Mo	100156
21		7266				✓							✓	✓			72 Mo	075318
22		7267					✓						✓	✓			120 Mo	054135
23		7268	✓										✓			✓	120 Mo	094939
24		7269				✓							✓	✓			60 Mo	098092
25		7270				✓							✓			✓	120 Mo	051266
26		7273						DUN					✓			✓	120 Mo	083455
27		7276	✓										✓	✓			120 Mo	090658
28		7271	✓										✓	✓			84 Mo	053888
29		7278						DUN					✓	✓			120 Mo	048923
30		7279						Pal					✓	✓			72 Mo	090887
31		7280			✓								✓			✓	132 Mo	054876
32		7281			✓								✓	✓			120 Mo	051548
33		7282						ARM					✓	✓			120 Mo	088625
34		7283	✓										✓	✓			132 Mo	051411
35	USET	7284					✓						✓			✓	144 Mo	092628
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 INFORMATION IS A FEDERAL CRIME AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 1001).

(b)(6)

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: 850110131

CORRECTED COPY

Office Id: 978501

Beltex Corporation
3801 N. Grove
Ft.Worth TX 76106

Service Date(s)
Begin: 25-APR-11
End: 25-APR-11

Reference NR:

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

Total Due \$ 104.00

Remarks: 1-HEALTH CERT.#T11-16858, 35 HORSES (4-25-11)
1-HEALTH CERT.# T-1116859, 35 HORSES (4-25-11)

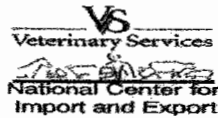
Payment Information

Nfc Id 751522503VA

Date	Amount	Payment Type	Account/Check #
29-APR-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.



Health Certificate No. 711-19109
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number) WFK

**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:

(b)(6)

(b)(6) Texas (b)(6)

2. Name and Address of Importer:

Nombre y Dirección del Importador:

(b)(6)

C.Emilio Zola #698 Col. El Colegio
Cd. Juarez. Chihuahua, Mexico 32340

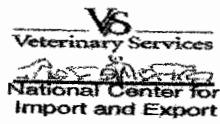
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number/ <i>Nombre de microchip</i>	Sex / <i>Sexo</i>	Appropriate age/ <i>Edad</i> <i>aproximada</i>	Microchip number/ <i>Nombre de microchip</i>	Sex / <i>Sexo</i>	Appropriate age/ <i>Edad</i> <i>aproximada</i>
981020005347038	Female	60 months	981020005344101	Female	60 months
981020005349295	Female	8 months	981020005352983	Gelding	60 months
981020005336768	Female	60 months	981020005345304	Gelding	36 months
981020005356318	Female	36 months	981020005354914	Gelding	48 months
981020005344034	Female	96 months	981020005342138	Female	48 months
981020005335483	Female	120 months	981020005353623	Female	36 months
981020005334355	Gelding	96 months	981020005338282	Female	72 months
981020005348200	Female	108 months	981020005330097	Female	96 months

Mexico Slaughter horses HC

480139698

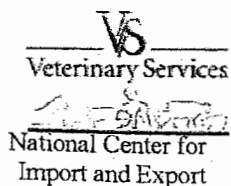
4/11/11



Health Certificate No. 711-19109
(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
981020005339922	Female	96 months	981020005348986	Female	3 months
981020005354407	Female	24 months	981020005346660	Female	36 months
981020005358590	Gelding	72 months	981020005337812	Female	96 months
981020005345315	Gelding	108 months	981020005328049	Female	108 months
981020005333329	Gelding	72 months	981020005336915	Female	12 months
981020005354986	Female	4 months	981020005349394	Female	12 months
981020005351173	Gelding	60 months	981020005340146	Female	72 months
981020005360174	Female	84 months	981020005359288	Female	144 months
981020005352670	Female	12 months	981020005336861	Female	120 months
98120005355570	gelding	60 months			

Mexico Slaughter horses HC



Health Certificate No. T11-19109
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number) KFW

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 4/11/2011

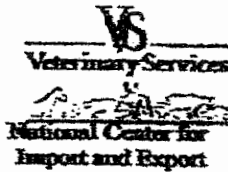
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

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. 711-19109 *WFH*
 (Valid only if the USDA Veterinary Seal
 Appears over the Certificate Number)

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

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

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

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

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

(b)(6)

/11/20
 Date

Firma del Médico Veterinario Acreditado
y Fecha

(b)(6)

11/11
 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 house HC

**AFFIDAVIT
DECLARACIÓN JURADA**

I (print) (b)(6) declare that the horses included in this shipment and accompanied by the health certificate number 711-19109 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 711-19109, 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)

4/11/11

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

(b)(6)

4/11/11

[Faint notary seal and text]

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

7/11-19/09

TIME HORSES LOADED ON CONVEYANCE
8:00 AM

DATE
3/11/2011

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
EL PASO, TEXAS

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

NAME OF AUCTION/MARKET
N/A

CONSIGNOR (OWNER/SHIPPER) NAME

CONSIGNEE (RECEIVER/DESTINATION) NAME

(b)(6)

(b)(6)

STREET ADDRESS
(b)(6)

STREET ADDRESS
C. EMILIO ZOLA #698 COL. EL COLEGIO

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

CITY, STATE, ZIP CODE
CD. JUAREZ, CHIHUAHUA, MEXICO 32340

AREA CODE & TELEPHONE NO.
(b)(6)

AREA CODE & TELEPHONE NO.
526-563-957813

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	USGE	1301		X						X				X				981020005347038
2	USGE	1302					X			X				X				981020005349295
3	USGE	1303					X			X				X				981020005336768
4	USGE	1304		X						X				X				981020005356318
5	USGE	1305					X			X				X				981020005344034
6	USGE	1306					X			X				X				981020005335483
7	USGE	1307					X			X						X		981020005334355
8	USGE	1308						BROWN		X				X				981020005348200
9	USGE	1309					X			X				X				981020005344101
10	USGE	1310						BUCK		X						X		981020005352983
11	USGE	1311		X						X						X		981020005345304
12	USGE	1312	X							X						X		981020005354914
13	USGE	1313				X							PAINT	X				981020005342138
14	USGE	1314				X							PAINT	X				981020005353623
15	USGE	1315						BROWN		X				X				981020005338282

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

SIGNATURE

I HEREBY AUTHORIZE THE 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 THE BEST INFORMATION CONTAINED IN THIS FORM IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

VS FOR

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

7/11-19/09
LFW

	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	USGE	1316	X						X					X				981020005330097
17	USGE	1317			X					X				X				981020005339922
18	USGE	1318	X							X				X				981020005354407
19	USGE	1319	X							X						X		981020005358590
20	USGE	1320					X			X						X		981020005345315
21	USGE	1321						BROWN	X							X		981020005333329
22	USGE	1322						BROWN	X					X				981020005354986
23	USGE	1323						BROWN		X						X		981020005351173
24	USGE	1324					X		X					X				981020005360174
25	USGE	1325						PAL		X				X				981020005352670
26	USGE	1326	X							X						X		981020005355570
27	USGE	1327					X			X				X				981020005348986
28	USGE	1328						DUN		X				X				981020005346660
29	USGE	1329						BROWN		X				X				981020005337812
30	USGE	1330						BROWN	X					X				981020005328049
31	USGE	1331					X		X					X				981020005336915
32	USGE	1332		X						X				X				981020005349394
33	USGE	1333					X		X					X				981020005340146
34	USGE	1334			X						X			X				981020005359288
35	USGE	1335						ROAN		X				X				981020005336861
36																		
37																		
38																		
39																		
40																		
41																		
42																		
43																		
44																		
45																		

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

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

VS
(SEP 2002)

WESTERN UNION

MONEY ORDER

THIS DOCUMENT CONTAINS A TRUE WATERMARK - HOLD UP TO LIGHT TO VIEW

WESTERN UNION FINANCIAL SERVICES INC. - ISSUER

Englewood, Colorado

Payable at Wells Fargo Bank Grand Junction - Downtown, N.A., Grand Junction, Colorado

14-194206559

\$ 53.00

VALERO

(ISSUER'S AGENT)

A 604235 D 041211

T 0802 01

141942065594 L 001363

11-19109

711-19109

WPH

PAY EXACTLY FIFTY-THREE DOLLARS AND NO CENTS

PAY TO THE ORDER OF

U.S.D.A.

(b)(6)

(b)(6)

⑆0102100400⑆ 40141942065594⑈

Residue are completed and
ave 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:
(b)(6)
(b)(6) Texas (b)(6)
2. Name and Address of Importer:
Nombre y Dirección del Importador:
(b)(6)
C.Emilio Zola #698 Col. El Colegio
Cd. Juarez.Chihuahua,mexico 32340
3. Identification of the animals to be exported / Identificación de los animales a ser exportados.

Microchip number/ Nombre de microchip	Sex / Sexo	Appropriate age/ Edad aproximada	Microchip number/ Nombre de microchip	Sex / Sexo	Appropriate age/ Edad aproximada
981020005347038	Female	60 months	981020005344101	Female	60 months
981020005349295	Female	8 months	981020005352983	Gelding	60 months
981020005336768	Female	60 months	981020005345304	Gelding	36 months
981020005356318	Female	36 months	981020005354914	Gelding	48 months
981020005344034	Female	96 months	981020005342138	Female	48 months
981020005335483	Female	120 months	981020005353623	Female	36 months
981020005334355	Gelding	96 months	981020005338282	Female	72 months
981020005348200	Female	108 months	981020005330097	Female	96 months

Mexico Slaughter horses HC

480139698

ANIMAL AND PLANT HEALTH INSPECTION SERVICE
STATEMENT OF SERVICES

Originating Office Phone

(b)(6)

Control Number: 4801B9698

Office Id: 974801

Service Date(s)

Begin: 11-APR-11

End: 11-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 # 11119109

Payment Information

Nfc Id
9999999999V

Date	Amount	Payment Type	Account/Check #
01-JUN-11	\$ 53.00	Money Order	14194206559

This invoice reflects an overpayment of \$1.00. Submit your refund request along with a copy of this invoice, your tax id number (SSN/EIN) and your bank electronic funds transfer information to: USDA, APHIS, FMD, P.O. Box 3334, Minneapolis, MN 55403-0334. If you have any questions, please call the APHIS helpline toll free at (877)777-2128 or email the abshelpline@aphis.usda.gov

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. 711-19094
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

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

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

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

1. Name and Address of Exporter:
Nombre y Dirección del Exportador:

Beltex Corporation
3801 N Grove
Fort Worth, Texas 76106
2. Name and Address of Importer:
Nombre y Dirección del Importador:

Empacadora de Carnes de Fresnillo, SA de CV
Avenida Plateros #480, Zona Centro
Fresnillo, Zacatecas
Mexico, C.P. 99000
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/Edad aproximada
237298	mare	84months	298397	mare	96months
261745	gelding	48months	301656	gelding	144months
246981	mare	60months	299896	gelding	60months
303137	mare	60months	306119	mare	24months
309288	gelding	84months	305200	mare	120months
253062	mare	120months	303185	mare	24months
305362	mare	36months	558344	gelding	144months
566663	gelding	96months	568036	gelding	120months

Mexico, Slaughter horse HC

4601B9272

4/5/11



Health Certificate No. 711-19094
(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
650382	mare	72months	558789	gelding	84months
578499	gelding	96months	610189	mare	48months
246542	mare	144months	258080	gelding	120months
246504	mare	96months	249401	gelding	144months
589697	gelding	144months	257735	gelding	24months
940723	mare	48months	973477	mare	144months
958065	gelding	144months	953136	mare	108months

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 4, 2011

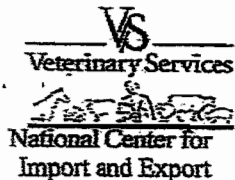
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

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. T11-19094
(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)

4-4-11

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

(b)(6)

4/5/11

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)} [redacted] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number 711-19094 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 711-19094 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, methyfuracil phenylthiouracil and propylthiouracil.

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

Date and signature of the exporter
Fecha y firma del exportador

^{(b)(6)} [redacted]

4/4/2011

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

^{(b)(6)} [redacted]

4/4/2011



**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

711-19094

TIME HORSES LOADED ON CONVEYANCE

DATE

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, TX

AREA CODE & TELEPHONE NO.

(915) 859-3942

STREET ADDRESS

2180 CR 120

CITY, STATE, ZIP CODE

Morton TX

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 Tattoos, etc.	REMARKS Include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USGT	5549					/						/	/			ART Hip	237298
2		5550	/										/	/				298397
3		5551					/						/			/		261745
4		5552				/							/			/		301656
5		5553	/										/	/				246981
6		5554					/						/			/		299896
7		5555					/						/	/				303137
8		5556	/										/	/				306119
9		5557						DUN					/			/		309288
10		5558					/						/	/				305200
11		5559					/						/	/				253002
12		5560						DUN					/	/				303185
13		5561						PAL					/	/				305362
14		5562	/										/			/		558344
15	USGT	5563						BUCK					/			/	ART Hip	566663

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 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

VS FC

Previous editions are obsolete

PAGE 1 OF 2

PART 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

711-19094

	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	5564							ALB					/			/	ART Hip	568036
17		5565			/								/	/					650382
18		5566		/									/			/			558789
19		5567							ROAN				/			/			578499
20		5568			/								/	/					610189
21		5569	/										/	/					246542
22		5570					/						/			/			258080
23		5571	/										/	/					246504
24		5572					/						/			/			249401
25		5573	/										/			/			589697
26		5574					/						/			/			257735
27		5575					/						/	/					940723
28		5576	/										/	/					973477
29		5577							DUN				/			/			958065
30	USGT	5578			/								/	/			ART Hip	953136	
31																			
32																			
33																			
34																			
35																			
36																			
37																			
38																			
39																			
40																			
41																			
42																			
43																			
44																			
45																			

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

S(6) [Redacted] contained in this form is true and correct to the best of my knowledge.)
 V [Redacted]
 Government Printing Office: 2004-616-624/99766
 PAGE 2 OF 2



Health Certificate No. 711-19095
(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
980353	mare	144months	935519	mare	144months
966742	gelding	144months	960808	gelding	120months
977653	mare	96months	983419	mare	72months
960012	gelding	84months	947071	gelding	144months
979916	mare	96months	972657	mare	120months
971825	mare	84months	951005	mare	96months
980399	mare	144months	973685	mare	144months
965400	mare	72months	975195	mare	120months

Mexico, Slaughter horse HC



Health Certificate No. 711-19095
(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
938191	mare	96months	958552	mare	96months
938201	mare	36months	958670	gelding	84months
939002	gelding	144months	951550	mare	144months
965975	mare	36months	950929	mare	144months
088206	mare	48months	092309	mare	144months
097742	mare	144months	098741	mare	96months
102952	mare	60months	041368	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 April 4, 2011

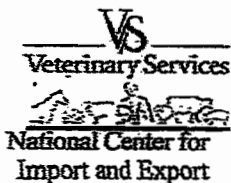
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

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. 711-19095
(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)

4-7-11

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

(b)(6)

4/5/11

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 T11-19095 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 T11-19095 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

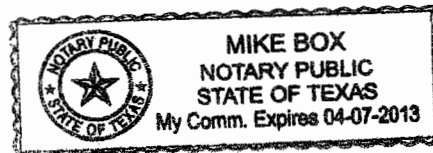
(b)(6)

4/4/2011

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

(b)(6)

4/4/2011



**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

711-19095

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

3:00 AM

4-5-11

Morton, Texas

VEHICLE LICENSE NO. OF AUCTION/MARKET

Beltex Feedlot

STREET ADDRESS

2180 CR 120

CITY, STATE, ZIP CODE

Morton, TX

AREA CODE & TELEPHONE NO.

(806) 525-4221

CONSIGNEE (RECEIVER/DESTINATION) NAME

TDA Pens

STREET ADDRESS

10800 Socorro Rd

CITY, STATE, ZIP CODE

El Paso, TX

AREA CODE & TELEPHONE NO.

(915) 859-3942

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

☒ Pregnant mares are not likely to foal (give birth) during the trip.

☒ Horses are able to bear weight on all 4 limbs.

☒ Foals are older than 6 months of age.

☒ Horses are not blind in both eyes.

☒ Horses are able to walk unassisted.

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
1	USAT	5579	/										/	/			ART Hip	980353
2		5580	/										/	/				935519
3		5581	/										/			/		906742
4		5582					/						/			/		960808
5		5583	/										/	/				977053
6		5584					/						/	/				983419
7		5585						BRN					/			/		960012
8		5586					/						/			/		947071
9		5587				/							/	/				979916
10		5588					/						/	/				972659
11		5589					/						/	/				971825
12		5590					/						/	/				951005
13		5591					/						/	/				980399
14		5592	/										/	/				973685
15	USAT	5593			/								/	/			ART Hip	965400

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 CONTAINED IN THIS FORM IS TRUE 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

VS FOR

Previous editions are obsolete

PAGE 1 OF 2

PART 1 - INSPECTOR

R2
**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

711-19095

	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	5594						ROAN					/	/			ART Hip	975195
17		5595	/										/	/				938191
18		5596					/						/	/				958552
19		5597					/						/	/				938201
20		5598					/						/		/			958670
21		5599					/						/		/			939002
22		5600					/						/	/				951550
23		5601						APP					/	/				965975
24		5602					/						/	/				950929
25		5603				/							/	/				088206
26		5604						ROAN					/	/				092309
27		5605	/										/	/				097742
28		5606					/						/	/				098741
29		5607					/						/	/				102952
30	USGT	5608		/									/	/			ART Hip	041368
31																		
32																		
33																		
34																		
35																		
36																		
37																		
38																		
39																		
40																		
41																		
42																		
43																		
44																		
45																		

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

(b)(6) 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

(b)(6)

Control Number: 4801B9272

Office Id: 974801

Service Date(s)

Begin: 05-APR-11

End: 05-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 # T1119094, 9095

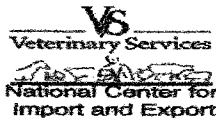
Payment Information

Nfc Id
751522503VA

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



Health Certificate No. 711-19093
(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:

(b)(6)

(b)(6) Texas (b)(6)

2. Name and Address of Importer:

Nombre y Dirección del Importador:

(b)(6)

C.Emilio Zola #698 Col. El Colegio

Cd. Juarez. Chihuahua, Mexico 32340

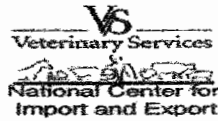
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

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>
981020005356641	Female	144 months	981020005330633	Female	180 months
981020005346571	Female	48 months	981020005348952	Gelding	144 months
981020005359549	Female	60 months	981020005358654	Female	60 months
981020005334278	Gelding	60 months	981020005356546	Female	60 months
981020005335642	Female	48 months	981020005334884	Gelding	204 months
981020005340876	Female	108 months	981020005337075	Female	48 months
981020005350200	Gelding	84 months	981020005329806	Female	60 months
981020005329700	Gelding	84 months	981020005344038	Gelding	72 months

Mexico Slaughter horses HC

4801B9276

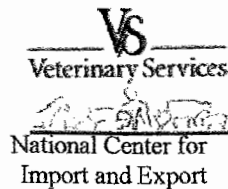
4/4



Health Certificate No. 711-19093
(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
981020005338152	Female	72 months	981020005340973	Female	36 months
981020005335898	Gelding	48 months	981020005335481	Female	120 months
981020005346292	Gelding	108 months	981020005344718	Gelding	132 months
981020005330990	Gelding	48 months	981020005359065	Female	48 months
981020005356621	Female	96 months	981020005353193	Female	36 months
981020005342865	Gelding	72 months	981020005358928	Female	48 months
981020005353350	Gelding	60 months	981020005337767	Gelding	48 months
981020005344338	Gelding	60 months	981020005343072	Gelding	108 months
981020005332804	Female	96 months	981020005359227	Female	144 months
981020005347889	Female	120 months	981020005351693	Gelding	72 months
981020005333112	Gelding	96 months			

Mexico Slaughter horses HC



Health Certificate No. 711-19093
(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 04/03/2011

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. T11-19093
(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.*]

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)

4/03/11

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

(b)(6)

4/4/11

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 house HC

**AFFIDAVIT
DECLARACIÓN JURADA**

I (print) ^{(b)(6)} declare that the horses included in this shipment and accompanied by the health certificate number 711-19093 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 711-19093 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)}

^{(b)(6)}

Date and signature of the Notary Public

Fecha y firma del Notario Público

4/4/11

4.4.11

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

771-18093

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

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	LSHB	7801						Red		X				X				981020005 356641
2	LSHB	7802						Brown		X				X				981020005 346571
3	LSHB	7803						Brown		X				X				981020005 359549
4	LSHB	7804						Red					Red			X		981020005 334878
5	LSHB	7805					X			X				X				981020005 335642
6	LSHB	7806					X			X				X				981020005 340876
7	LSHB	7807					X			X						X		981020005 350200
8	LSHB	7808						Brown					APP			X		981020005 329700
9	LSHB	7809						Brown		X				X				981020005 330633
10	LSHB	7850					X			X						X		981020005 348952
11	LSHB	7810		X						X				X				981020005 358654
12	LSHB	7811		X						X				X				981020005 356546
3	LSHB	7812						Brown		X						X		981020005 334884
4	LSHB	7814	X							X				X				981020005 337075
5	LSHB	7815					X			X				X				981020005 329806

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

GNAT

HEREBY I CERTIFY THAT I HAVE READ THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE SHIPPER TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY SENDING 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).

GNAT hereby certifies that the information contained in this form is true and correct to the best of his/her 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

711-19093

	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	7816					X			X						X		981020005344038
17	USHB	7817						DUN		X				X				981020005338152
18	USHB	7818				X							PAINT			X		981020005335898
19	USHB	7819		X									APP			X		981020005346292
20	USHB	7820						ROAN		X						X		981020005330990
21	USHB	7821		X						X				X				981020005356621
22	USHB	7822				X							PAINT			X		981020005342865
23	USHB	7823		X						X						X		981020005353350
24	USHB	7824	X							X						X		981020005344338
25	USHB	7825	X							X				X				981020005340973
26	USHB	7826				X							PAINT	X				981020005335481
27	USHB	7827					X			X						X		981020005344718
28	USHB	7828						PAL		X				X				981020005359065
29	USHB	7829					X			X				X				981020005353193
30	USHB	7830					X			X				X				981020005358928
31	USHB	7831	X							X						X		981020005337767
32	USHB	7832					X			X						X		981020005343072
33	USHB	7833				X							PAINT	X				981020005332804
34	USHB	7834					X			X				X				981020005359227
35	USHB	7835		X						X				X				981020005347889
36	USHB	7836		X						X						X		981020005351693
37	USHB	7837	X							X						X		981020005333112
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)

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

PAY EXACTLY FIFTY-THREE DOLLARS AND NO CENTS

PAY TO THE ORDER OF

(b)(6)

⑆ 102100400⑆ 40142417683302⑈

h Certificate No. 711-19093

d only if the USDA Veterinary Seal
appears over the Certificate Number)

HORSES EXPORTED
MEXICO
PAR CABALLOS PARA
ICO

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:

(b)(6)

(b)(6) Texa (b)(6)

2. Name and Address of Importer:
Nombre y Dirección del Importador:

(b)(6)

C.Emilio Zola #698 Col. El Colegio
Cd. Juarez.Chihuahua,mexico 32340

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

Microchip number/ <i>Nombre de microchip</i>	Sex / <i>Sexo</i>	Appropriate age/ <i>Edad</i> <i>aproximada</i>	Microchip number/ <i>Nombre de microchip</i>	Sex / <i>Sexo</i>	Appropriate age/ <i>Edad</i> <i>aproximada</i>
981020005356641	Female	144 months	981020005330633	Female	180 months
981020005346571	Female	48 months	981020005348952	Gelding	144 months
981020005359549	Female	60 months	981020005358654	Female	60 months
981020005334278	Gelding	60 months	981020005356546	Female	60 months
981020005335642	Female	48 months	981020005334884	Gelding	204 months
981020005340876	Female	108 months	981020005337075	Female	48 months
981020005350200	Gelding	84 months	981020005329806	Female	60 months
981020005329700	Gelding	84 months	981020005344038	Gelding	72 months

Mexico Slaughter horses HC

4801B9276

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

Originating Office Phone : ,

(b)(6)

Control Number: 4801B9276

Office Id: 974801

Service Date(s)

Begin: 04-APR-11

End: 04-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# T1119093

Payment Information

Nfc Id
9999999999V

Date	Amount	Payment Type	Account/Check #
23-MAY-11	\$ 52.00	Money Order	14241768330

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. 711-19088
(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: Eupacadora 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
091107	mare	84months	059854	gelding	144months
093356	mare	48months	081911	gelding	24months
085453	mare	96months	040210	mare	96months
100857	mare	96months	096597	mare	36months
100946	mare	48months	059738	gelding	72months
102575	mare	72months	062507	mare	144months
043397	gelding	132months	044087	mare	144months
060512	mare	84months	042836	gelding	84months

Mexico, Slaughter horse HC

480139277

4/4/11



Health Certificate No. 711-19088
 (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
091297	gelding	144months	053109	gelding	84months
101630	mare	84months	057144	mare	96months
058097	mare	144months	103286	mare	120months
059001	mare	36months	059486	gelding	84months
093494	gelding	36months	105401	mare	36months
103633	gelding	24months	104755	gelding	36months
104430	mare	36months	048915	gelding	72months

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 1, 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. 711-19088
(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)

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

(b)(6)

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)} [redacted] beltex corp) declare that the horses included in this shipment and accompanied by the health certificate number T/1-19088 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/1-19088 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

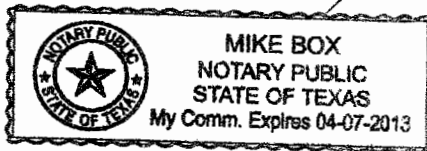
^{(b)(6)} [redacted]

4/11/2011

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

Mike Box

4/11/2011



**OWNER/SHIPPER CERTIFICATE
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

711-19088

E HORSES LOADED ON CONVEYANCE

DATE _____

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

(b)(6)

3elter Feedlot

180 CR 120
Y, STATE, ZIP CODE

Y, STATE, ZIP CODE

Hoster 11 79346
EA CODE & TELEPHONE NO.

—A CODE & TELEPHONE NO.

806) 525-4211

ISSIGNEE (RECEIVER/DESTINATION) NAME

TDA Pens

STREET ADDRESS

10800 Socorro Rd

CITY, STATE, ZIP CODE

El Paso, TX

AREA CODE & TELEPHONE NO.

(915) 859-3942

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

☒ Pregnant mares are not likely to foal (give birth) during the trip.

☒ Horses are able to bear weight on all 4 limbs.

☒ Foals are older than 6 months of age.

☒ Horses are not blind in both eyes.

☒ Horses are able to walk unassisted.

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
USGT	5487					✓						✓	✓				Art 2/24 091107
	5488	✓										✓			✓		059854
	5489					✓						✓	✓				093356
	5490					✓						✓			✓		081911
	5492	✓										✓	✓				085453
	5493						DUN					✓	✓				040210
	5494					✓						✓	✓				100857
	5495	✓										✓	✓				096597
	5496					✓						✓	✓				100946
	5497					✓						✓			✓		059738
	5498	✓										✓	✓				102575
	5499	✓										✓	✓				062507
	5500	✓										✓			✓		043397
	5501		✓									✓	✓				044087
USGT	5502						APP					✓	✓			Art 2/24 060512	

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

iNATURE

EREBY AL [REDACTED] [REDACTED] AND THE INFORMATION IN IT AS
 MPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY
 NG 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).

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

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE _____

TIME

**DIRECCION GENERAL DE INSPECCION EN
FRONTERAS (DGIF)**

EST.

DATE _____

TIME

Pen 10

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

711-19088

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		
USGT	5503	✓										✓			✓	✓	042836
	5504				✓							✓			✓		091297
	5505		✓									✓			✓		053109
	5506					✓						✓	✓				101630
	5507	✓										✓	✓				057144
	5508	✓										✓	✓				058097
	5509				✓							✓	✓				103286
	5510					✓						✓	✓				059001
	5511						ROAN					✓			✓		059486
	5512				✓							✓			✓		093494
	5513						ROAN					✓	✓				105401
	5514					✓						✓			✓		103633
	5515						APP					✓			✓		104155
	5517	✓										✓	✓				104430
USGT	5518	✓										✓			✓	✓	048915

REBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION 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 RISONMENT 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. 711-19089
(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
083451	gelding	144months	057070	mare	36months
083720	gelding	36months	057616	mare	36months
105351	gelding	144months	103440	mare	84months
055257	gelding	24months	103534	mare	72months
239912	mare	144months	306579	mare	84months
301904	mare	48months	300329	gelding	132months
300957	mare	84months	309161	mare	144months
306269	gelding	144months	298271	mare	108months

Mexico, Slaughter horse HC



Health Certificate No. 711-19089
 (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
243893	gelding	120months	303956	gelding	144months
302645	mare	84months	244311	gelding	72months
237152	mare	96months	300828	mare	84months
299969	mare	96months	301510	gelding	120months
301696	mare	96months	297783	mare	84months
304206	gelding	36months	309125	gelding	36months
261648	mare	120months	303958	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 April 1, 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.

[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)

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)} [redacted] - Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number T11-19089 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 T11-19089 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

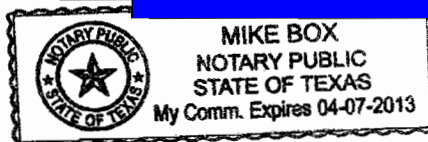
^{(b)(6)} [redacted]

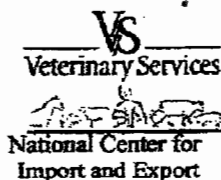
4/11/2011

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

^{(b)(6)} [redacted]

4/11/2011





Health Certificate No. 711-19088
(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
091107	mare	84months	059854	gelding	144months
093356	mare	48months	081911	gelding	24months
085453	mare	96months	040210	mare	96months
100857	mare	96months	096597	mare	36months
100946	mare	48months	059738	gelding	72months
102575	mare	72months	062507	mare	144months
043397	gelding	132months	044087	mare	144months
060512	mare	84months	042836	gelding	84months

Mexico, Slaughter horse HC

4801B9277

4/4/11



Health Certificate No. T11-19088
 (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
091297	gelding	144months	053109	gelding	84months
101630	mare	84months	057144	mare	96months
058097	mare	144months	103286	mare	120months
059001	mare	36months	059486	gelding	84months
093494	gelding	36months	105401	mare	36months
103633	gelding	24months	104755	gelding	36months
104430	mare	36months	048915	gelding	72months

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 1, 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. 711-19088
 (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)

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)} [redacted] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number T/1-19088 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/1-19088 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)} [redacted]

4/1/2011

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

^{(b)(6)} [redacted]

4/1/2011



Pen 10

154

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
T11-19088

DATE HORSES LOADED ON CONVEYANCE 2:30 AM	DATE 4-4-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Morton Texas
(b)(6)		NAME OF AUCTION/MARKET

SHIPPER (OWNER/SHIPPER) NAME Belter Feedlot	CONSIGNEE (RECEIVER/DESTINATION) NAME TDA Pens
STREET ADDRESS 1180 C.R. 120	STREET ADDRESS 10800 Socorro Rd
CITY, STATE, ZIP CODE Morton, IL 61550	CITY, STATE, ZIP CODE El Paso, TX
AREA CODE & TELEPHONE NO. (815) 525-4211	AREA CODE & TELEPHONE NO. (915) 859-3942

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

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

TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE						SEX		BRANDS Tattoos, etc.	REMARKS Include existing conditions
		Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld		
USGT	5487					✓						✓	✓			Art 24 091107	
	5488	✓										✓			✓	059854	
	5489					✓						✓	✓			093356	
	5490					✓						✓			✓	081911	
	5492	✓										✓	✓			085453	
	5493						DUN					✓	✓			040210	
	5494					✓						✓	✓			100857	
	5495	✓										✓	✓			096597	
	5496					✓						✓	✓			100946	
	5497					✓						✓			✓	059738	
	5498	✓										✓	✓			102575	
	5499	✓										✓	✓			062507	
	5500	✓										✓			✓	043397	
	5501		✓									✓	✓			044087	
USGT	5502						APP					✓	✓			Art 24 060512	

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

NATURE (b)(6)

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

NATURE OF OWNER/SHIPPER (I certify that the information contained in this form is true and correct to best of my knowledge.) (b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)
EST. _____
DATE _____
TIME _____
DIRECCION GENERAL DE INSPECCION EN FRONTERAS (DGIF)
EST. _____
DATE _____
TIME _____

Pen 10

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

711-19088

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		
USGT	5503	✓										✓			✓	AP	042836
	5504				✓							✓			✓		091297
	5505		✓									✓			✓		053109
	5506					✓						✓	✓				101630
	5507	✓										✓	✓				057144
	5508	✓										✓	✓				058097
	5509				✓							✓	✓				103286
	5510					✓						✓	✓				059001
	5511						Roan					✓			✓		059486
	5512				✓							✓			✓		093494
	5513						Roan					✓	✓				105401
	5514					✓						✓			✓		103633
	5515						APP					✓			✓		104155
	5517	✓										✓	✓				104430
USGT	5518	✓										✓			✓	AP	048915

REBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION 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 RISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

IATLURE 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. 711-19089
(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
083451	gelding	144months	057070	mare	36months
083720	gelding	36months	057616	mare	36months
105351	gelding	144months	103440	mare	84months
055257	gelding	24months	103534	mare	72months
239912	mare	144months	306579	mare	84months
301904	mare	48months	300329	gelding	132months
300957	mare	84months	309161	mare	144months
306269	gelding	144months	298271	mare	108months

Mexico, Slaughter horse HC



Health Certificate No. 711-19089
 (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
243893	gelding	120months	303956	gelding	144months
302645	mare	84months	244311	gelding	72months
237152	mare	96months	300828	mare	84months
299969	mare	96months	301510	gelding	120months
301696	mare	96months	297783	mare	84months
304206	gelding	36months	309125	gelding	36months
261648	mare	120months	303958	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 April 1, 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.

[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)

[Redacted Signature]

4-1-11

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

(b)(6)

[Redacted Signature]

4/4/11

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)} [redacted] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number T11-19089 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 T11-19089 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

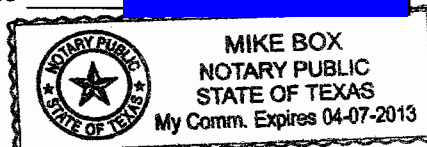
^{(b)(6)} [redacted]

4/11/2011

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

^{(b)(6)} [redacted]

4/11/2011



Pen 9

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 **R-5**
APPROVED
OMB NO.
0579-0160
711-19089

HORSES LOADED ON CONVEYANCE 1:30 AM		DATE 4-4-11	CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE Morton Texas
(b)(6)		NAME OF AUCTION/MARKET	
SIGNOR (OWNER/SHIPPER) NAME Belter Feedlot		CONSIGNEE (RECEIVER/DESTINATION) NAME TDA Pens	
STREET ADDRESS 2180 C.R. 120		STREET ADDRESS 10800 Socorro Rd	
CITY, STATE, ZIP CODE Morton Tex 79346		CITY, STATE, ZIP CODE El Paso, TX	
AREA CODE & TELEPHONE NO. (915) 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

☒ 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		
USGT	5519						BUCK					✓			✓	APP	083451
	5520					✓						✓	✓				057070
	5521	✓										✓			✓		083720
	5522					✓						✓	✓				057616
	5523						ROAN					✓			✓		105351
	5524	✓										✓	✓				103440
	5525						DUN					✓			✓		055257
	5526					✓						✓	✓				103534
	5527					✓						✓	✓				239912
	5528	✓										✓	✓				306519
	5529					✓						✓	✓				301904
	5530						PAL					✓			✓		300329
	5531	✓										✓	✓				300957
	5532						APP					✓	✓				309161
USGT	5533			✓								✓			✓	APP	306269

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

SIGNATURE (b)(6)

HEREBY AUTHENTICATE THE DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY MAKING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$5,000 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 _____

Rev 9

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

711-19089

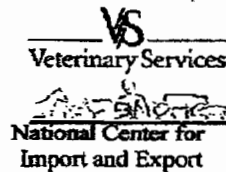
OWNER/SHIPPER CERTIFICATE
FITNESS TO TRAVEL TO A SLAUGHTER FACILITY
(CONTINUATION SHEET)
(Please type or print in ink)

	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			
6	USGT	5534					✓						✓	✓				298271	
7		5535				✓							✓			✓		243893	
8		5536				✓							✓			✓		303956	
9		5537	✓										✓	✓				302645	
10		5538					✓						✓			✓		244311	
11		5539					✓						✓	✓				237152	
12		5540					✓						✓	✓				300828	
13		5541				✓							✓	✓				299969	
14		5542				✓							✓			✓		301510	
15		5543					✓						✓	✓				301696	
16		5544		✓									✓	✓				297783	
17		5545	✓										✓			✓		304206	
18		5546					✓						✓			✓		309125	
19		5547					✓						✓	✓				261648	
20	USGT	5548				✓							✓	✓				303958	
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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.)



Health Certificate No. 711-19090
(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 ZOOSANTARIO 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
094062	mare	36months	056104	mare	36months
062222	mare	48months	099356	mare	36months
043546	mare	48months	084654	mare	108months
060281	gelding	144months	043585	mare	96months
060391	mare	144months	099103	mare	84months
094087	mare	96months	059837	gelding	84months
060500	gelding	120months	062068	mare	132months
053528	mare	96months	081094	gelding	120months

Mexico, Slaughter horse HC



Health Certificate No. 711-19090
(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
061096	mare	84months	094320	mare	96months
054815	mare	144months	092229	mare	120months
084455	gelding	144months	084778	mare	120months
102226	gelding	120months	044275	mare	72months
059007	gelding	96months	089068	mare	96months
059605	mare	144months	094688	mare	120months
054167	mare	108months	041529	mare	108months

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 1, 2011

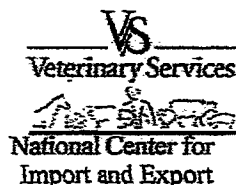
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

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. 711-17090
(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)

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)} [redacted] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number T11-19090 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 T11-19090 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)} [redacted]

4/1/2011

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

^{(b)(6)} [redacted]

4/1/2011



Pen 8

R-3

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
711-69090

TIME HORSES LOADED ON CONVEYANCE

2:00

DATE

4/4/11

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

Morton Texas

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

Belter Feedlot

CONSIGNEE (RECEIVER/DESTINATION) NAME

TDA Pens

STREET ADDRESS

2180 C.R. 120

STREET ADDRESS

10800 Socorro Rd

CITY, STATE, ZIP CODE

Morton, TX 79346

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

☐ 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	Stall	Geld		
1	USGT	5450						✓					✓	✓			AP 24	094062
2		5458						✓					✓	✓				056104
3		5459						✓					✓	✓				062222
4		5460			✓								✓	✓				099356
5		5401						DUN					✓	✓				043546
6		5402						✓					✓	✓				084654
7		5403	✓										✓			✓		060281
8		5404	✓										✓	✓				043585
9		5405		✓									✓	✓				060391
10		5406						AAP					✓	✓				099103
11		5407	✓										✓	✓				094087
12		5408				✓							✓			✓		059837
13		5409				✓							✓			✓		060500
14		5470						✓					✓	✓				062068
15	USGT	5471						✓					✓	✓			AP 24	053528

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

SIGNATURE

HEREBY A _____ DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA OR DGIF TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY SING 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

Pen 8

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

T11-19090

	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		
16	USGT	5472	✓									✓			✓	Art Map	081094
17		5473					APP					✓	✓				061096
18		5474	✓									✓	✓				094320
19		5475			✓							✓	✓				054815
20		5476					ALB					✓	✓				092229
21		5477					BUCK					✓		✓			084455
22		5478			✓							✓	✓				084778
23		5479			✓							✓		✓			102226
24		5480				✓						✓	✓				044275
25		5481			✓							✓		✓			059007
26		5482				✓						✓	✓			089068	
27		5483					ROAN					✓	✓			059605	
28		5484				✓						✓	✓			094688	
29		5485				✓						✓	✓			054167	
30	USGT	5486	✓									✓	✓			Art Map	041529
31																	
32																	
33																	
34																	
35																	
36																	
37																	
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45																	

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. 711-19091
(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
082240	mare	24months	084963	mare	24months
062311	gelding	24months	058095	mare	24months
087781	gelding	24months	104216	mare	24months
091024	gelding	24months	105372	mare	36months
087305	mare	24months	100046	mare	24months
082706	mare	144months	056555	mare	36months
103236	mare	144months	081581	mare	48months
103142	mare	24months	076353	mare	48months

Mexico, Slaughter horse HC



Health Certificate No. 711-19091
(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
083064	mare	84months	083689	mare	24months
083169	gelding	144months	058958	mare	48months
082272	mare	60months	084273	mare	24months
059098	mare	60months	089383	mare	48months
089092	gelding	36months	082001	mare	144months
058806	gelding	60months	105316	mare	72months
105050	gelding	48months	093625	mare	48months

Total: 30hd

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

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

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

Inspection date / Fecha de inspección March 31, 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

National Center for
Import and Export

(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)]

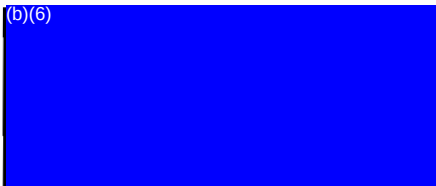
GRANT WEASE DVM
USDA, APHIS, VETERINARY SVCS.
EL PASO, TEXAS

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)



*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*

4/4/11

(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*).

AFFIDAVIT
DECLARACIÓN JURADA

I (print) ^{(b)(6)} [redacted] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number T11-19091 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 T11-19091 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)} [redacted]

4/11/2011

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

^{(b)(6)} [redacted]

4/11/2011



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

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

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

FORM
APPROVED
OMB NO.
0579-0160
TII-19091

HORSES LOADED ON CONVEYANCE
(b)(6)

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE
Morton Texas

DATE
4-11

NAME OF AUCTION/MARKET

SIGNOR (OWNER/SHIPPER) NAME
Bella Feedlot

STREET ADDRESS
2180 C.R. 120

CITY, STATE, ZIP CODE
Morton IL 79346

AREA CODE & TELEPHONE NO.
(915) 525-4221

CONSIGNEE (RECEIVER/DESTINATION) NAME
TDA Pens

STREET ADDRESS
10800 SDCorro Rd

CITY, STATE, ZIP CODE
El Paso, TX

AREA CODE & TELEPHONE NO.
(915) 859-3942

Check the box that indicates the following is true for all the horses on this certificate

☒ Pregnant mares are not likely to foal (give birth) during the trip.

☒ Horses are able to bear weight on all 4 limbs.

☒ 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			
USGT	5394						Pal											082240
	5395																	084963
	5396						Buck											062311
	5397						Red											058095
	5398																	087781
	5399																	104216
	5400																	091024
	5401																	105372
	5402																	087305
	5403																	100046
	5404																	082706
	5405																	056555
	5406																	103236
	5407																	081581
USGT	5408																	103142

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

SIGNATURE
(b)(6)

REBY AUCTIONEER AND THE INFORMATION IN IT AS COMPLETED BY THE CIA 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 \$1000 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 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

PAGE 1 OF 1

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

ben 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
T11-19091

	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	5409						DUN					V	V				DT	076353
17		5410			V								V	V					083064
18		5411					V						V	V					083689
19		5412		V									V			V			083169
20		5413				V							V	V					058958
21		5414			V								V	V					082272
22		5415					V						V	V					084273
23		5417					V						V	V					059098
24		5418		V									V	V					089383
25		5419	V										V			V			089092
26		5420				V							V	V					082001
27		5422			V								V			V			058806
28		5423						ALB					V	V					105316
29		5424	V										V			V			105050
30	USGT	5425						FAL					V	V				DT	093625
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).

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)

VS
(SEP 2002)



Health Certificate No. 711-19092
 (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
084689	gelding	60months	055339	mare	120months
104838	gelding	144months	056862	mare	144months
054043	gelding	144months	056253	mare	36months
053845	mare	144months	082197	mare	24months
104829	gelding	108months	050579	gelding	24months
084453	mare	144months	104502	gelding	24months
093965	gelding	12months	088961	gelding	132months
081813	mare	84months	092668	mare	120months

Mexico, Slaughter horse HC



Health Certificate No. 711-19092
 (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
066583	gelding	120months	048199	mare	72months
080542	mare	96months	035105	mare	36months
034463	mare	120months	061637	gelding	144months
061288	mare	96months	060770	mare	144months
043063	gelding	144months	092281	gelding	144months
043669	gelding	120months	062712	mare	72months
040916	mare	120months	060945	mare	36months

Total: 30hd

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

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

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

Inspection date / Fecha de inspección March 31, 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.

NATIONAL CANINE FOR
Import and Export

(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)

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)} [redacted] beltex corp declare that the horses included in this shipment and accompanied by the health certificate number T11-19092 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 T11-19092 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

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

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

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

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

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

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

Date and signature of the exporter
Fecha y firma del exportador

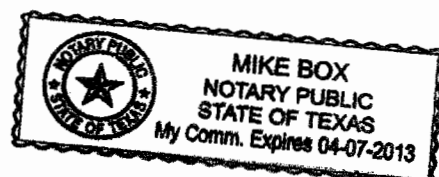
^{(b)(6)} [redacted]

4/11/2011

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

^{(b)(6)} [redacted]

4/11/2011



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

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

FORM
APPROVED
OMB NO.
0579-0160

711-19092

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	WGT	5420						✓						✓			✓	084689
2		5427						ROAN						✓				055339
3		5428	✓											✓				104838
4		5429						✓						✓				056862
5		5430						JAL						✓				054043
6		5431						✓						✓				056253
7		5432		✓										✓				053845
8		5433												✓				082197
9		5434						JAL						✓				104829
10		5435						✓						✓				050579
11		5436						ROAN						✓				084453
12		5437	✓											✓				104502
13		5438						✓						✓				093965
14		5439	✓											✓				088961
15	WGT	5440						✓						✓			✓	081813

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

DIRECCION GENERAL DE INSPECCION EN
FRONTERAS (DGIF)

EST.

DATE

TIME

SIGNATURE

HEREBY AUTHORIZED AND THE INFORMATION IN IT AS COMPLETED 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

711-19092

	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	Stai	Geld			
16	WGT	5441				✓							✓	✓				<i>Aut Ship</i>	092668
17		5442					✓	<i>Dum</i>					✓	✓			✓		066583
18		5443					✓						✓	✓					048199
19		5444						<i>RAL</i>					✓	✓					080542
20		5445					✓						✓	✓					035105
21		5446	✓										✓	✓					034463
22		5447	✓										✓	✓			✓		061637
23		5448	✓										✓	✓					061288
24		5449			✓								✓	✓					060770
25		5450					✓						✓	✓			✓		043063
26		5451						<i>RAIN</i>					✓	✓			✓		092281
27		5452					✓						✓	✓			✓		043669
28		5453					✓						✓	✓					062712
29		5454						<i>Dum</i>					✓	✓					040916
30	WGT	5455					✓						✓	✓				<i>Aut Ship</i>	060945
31																			
32																			
33																			
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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) 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

Control Number: 4801B9277

Office Id: 974801

Service Date(s)

Begin: 04-APR-11

End: 04-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	5.00	260.00

Total Due \$ 260.00

Remarks: Health Certificate # T1119088, 9089, 9090, 9091, 9092

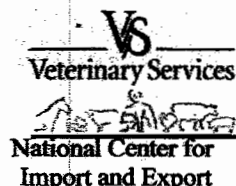
Payment Information

Nfc Id
751522503VA

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



Health Certificate No. 711-19130
(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.

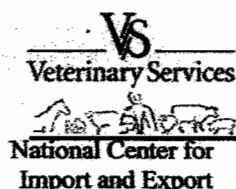
1. Name and Address of Exporter: Beltex Corporation
Nombre y Dirección del Exportador: 3801 N Grove
Fort Worth, Texas 76106
2. Name and Address of Importer: Empacadora de Carnes de Fresnillo, SA de CV
Nombre y Dirección del Importador: Avenida Plateros #480, Zona Centro
Fresnillo, Zacatecas
Mexico, C.P. 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
280535	gelding	144months	280649	mare	144months
280661	mare	72months	010847	gelding	144months
280656	mare	120months	280641	mare	72months
280652	gelding	108months	280589	mare	144months
280670	gelding	96months	280631	mare	144months
280528	mare	108months	280567	mare	144months
280609	mare	72months	280628	gelding	84months
280566	gelding	96months	280645	mare	144months

Mexico, Slaughter horse HC

480139724

4/25/11



Health Certificate No. 711-19130
 (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
280646	mare	120months	280565	mare	72months
280668	mare	120months	097889	gelding	96months
280543	mare	108months	280627	gelding	144months
280611	mare	96months	102041	gelding	144months
280607	mare	96months	280706	gelding	144months
304253	gelding	144months	301920	gelding	24months
301001	gelding	144months	307400	mare	84months

Total: 30hd

CERTIFICATION STATEMENTS / CERTIFICACIONES

1. Horses originate from the United States.

Los animales son originarios de Estados Unidos.

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

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

Inspection date / Fecha de inspección April 22, 2011

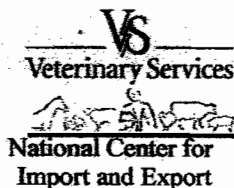
3. Prior to shipment the vehicles used to transport the animals to the border were cleaned and disinfected.

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

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

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

Mexico, Slaughter horse HC



Health Certificate No. 711-19130
 (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)

 4-22-11
 Signature of Accredited Veterinarian and Date
*Firma del Médico Veterinario Acreditado
 y Fecha*

(b)(6)

 4/25/11
 Signature of Endorsing Federal Veterinarian
 and Date
*Firma del Médico Veterinario que endosa
 y Fecha*

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

**AFFIDAVIT
DECLARACIÓN JURADA**

I (print) ^{(b)(6)} [redacted] Meltex Corp declare that the horses included in this shipment and accompanied by the health certificate number T11-19130 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 T11-19130 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

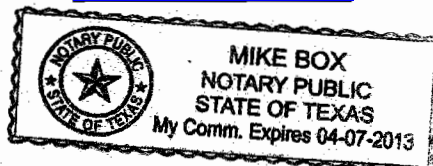
^{(b)(6)} [redacted]

4/22/2011

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

^{(b)(6)} [redacted]

4/22/2011



pen 10

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

711-19130

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

12:54 Am

4-28-11

Morton Texas

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

(b)(6)

CONSIGNEE (RECEIVER/DESTINATION) NAME

Belton Feedlot

T.D.A. Pens

STREET ADDRESS

STREET ADDRESS

2180 C.R. 120

10300 Socorro Rd

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

Morton, TX

El Paso, TX

AREA CODE & TELEPHONE NO.

AREA CODE & TELEPHONE NO.

(806) 525-4221

(915) 859-3942

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

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

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE						SEX			BRANDS Tattoos, etc.	REMARKS Include existing conditions
			Bay	Grey	Blk	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld			
1	USGT	1538		✓									✓			✓	ADP	280535	
2		1539					✓						✓	✓				280649	
3		1540				✓							✓	✓				280661	
4		1541	✓										✓			✓		010847	
5		1542				✓							✓	✓				280656	
6		1543					✓						✓	✓				280641	
7		1544				✓							✓			✓		280651	
8		1545					✓						✓	✓				280589	
9		1546				✓							✓			✓		280670	
10		1547	✓										✓	✓				280631	
11		1548				✓							✓	✓				280518	
12		1549											✓	✓				280567	
13		1552					✓						✓	✓				280609	
14		1553				✓							✓			✓		280628	
15	USGT	1554				✓							✓			✓	ADP	280566	

HORSE (b)(6)
HOURS

OF 6 CONSECUTIVE

SIGNATURE

I HEREBY

COMPLY

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)

SIGNATURE

the

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

771-19130

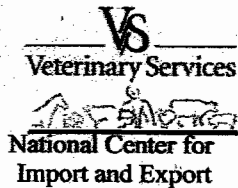
	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE					SEX			BRANDS Tattoos, etc.	REMARKS Include precondition	
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stai	Geld			
16	USGT	1555					✓						✓	✓					A 280645
17		1556	✓										✓	✓					280646
18		1557	✓										✓	✓					280565
19		1558	✓										✓	✓					280668
20		1559					✓						✓			✓			097889
21		1560			✓								✓	✓					280543
22		1561											✓			✓			280627
23		1562						BRN					✓	✓					280611
24		1563	✓										✓			✓			102041
25		1564					✓						✓	✓					280607
26		1566					✓						✓			✓			280706
27		1567					✓						✓			✓			304253
28		1568	✓										✓			✓			301920
29		1569			✓								✓			✓			301001
30	USGT	1570	✓										✓	✓				A 280740	
31																			
32																			
33																			
34																			
35																			
36																			
37																			
38																			
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41																			
42																			
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44																			
45																			

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

SIGNATURE

(Signature) form is true and correct to the best of my knowledge.)

VS FOR
(SEP 2002)



Health Certificate No. 711-19131
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

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

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

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

1. Name and Address of Exporter:
Nombre y Dirección del Exportador:

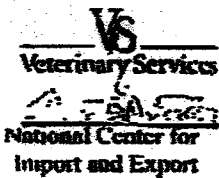
Beltex Corporation
3801 N Grove
Fort Worth, Texas 76106
2. Name and Address of Importer:
Nombre y Dirección del Importador:

Empacadora de Carnes de Fresnillo, SA de CV
Avenida Plateros #480, Zona Centro
Fresnillo, Zacatecas
Mexico, C.P. 99000
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / <i>Número de microchip</i>	Sex/Sexo	Approximate age/Edad <i>aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / Sexo	Approximate age/ Edad <i>aproximada</i>
057949	mare	120months	049896	gelding	144months
059860	mare	144months	104307	gelding	84months
096494	mare	36months	091910	gelding	60months
104388	mare	24months	055114	mare	24months
099965	mare	48months	096852	gelding	84months
073780	mare	120months	099403	mare	24months
044089	mare	84months	049997	gelding	36months
093366	mare	60months	090285	mare	24months

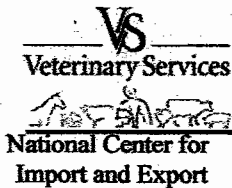
Mexico, Slaughter horse HC

4/25/11



Health Certificate No. 711-19131
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

Microchip number / <i>Número de microchip</i>	Sex/Sexo	Approximate age/ <i>Edad aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / Sexo	Approximate age/ <i>Edad aproximada</i>
094252	mare	36months	089712	mare	120months
088837	mare	120months	092938	gelding	120months
062083	mare	108months	061260	mare	120months
054123	mare	108months	087022	gelding	120months
105496	gelding	60months	096084	gelding	60months
102390	gelding	120months	088630	gelding	60months
094575	mare	120months	095703	gelding	84months
046513	mare	132months	087551	gelding	36months
049719	mare	24months	060477	mare	144months
Total: 34hd					



Health Certificate No. 711-19131
(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

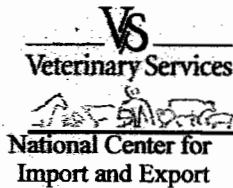
CERTIFICATION STATEMENTS / CERTIFICACIONES

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 22, 2011

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

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



Health Certificate No. 711-19/31
 (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)]

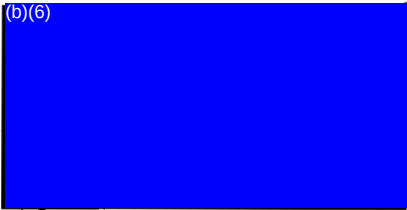
GRANT WEASE DVM
 USDA, APHIS, VETERINARY SVCS.
 EL PASO, TEXAS

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)

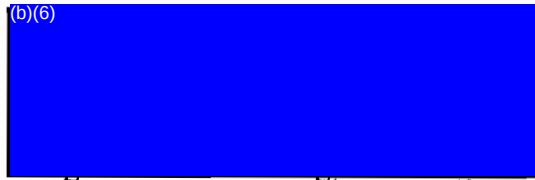


4-22-11

arian and Date

*Firma del Médico Veterinario Acreditado
 y Fecha*

(b)(6)



4/25/11

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 (print) ^{(b)(6)} [REDACTED] Beltex Corp declare that the horses included in this shipment and accompanied by the health certificate number T11-19131 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 T11-19131 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

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

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

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

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

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

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

Date and signature of the exporter
Fecha y firma del exportador

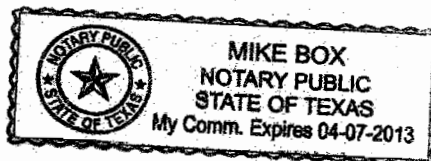
^{(b)(6)} [REDACTED]

4/22/2011

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

^{(b)(6)} [REDACTED]

4/22/2011



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

TIME HORSES LOADED ON CONVEYANCE

DATE

CITY AND STATE WHERE HORSES WERE LOADED ON CONVEYANCE

8-21-05 7h

6-25-11

Morton, Texas

(b)(6)

NAME OF AUCTION/MARKET

CONSIGNOR (OWNER/SHIPPER) NAME

CONSIGNEE (RECEIVER/DESTINATION) NAME

Belter Feedlot

TDA Rm's

STREET ADDRESS

STREET ADDRESS

2180 C.R. 120

10800 Socorro Rd.

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

Morton, IL

El Paso, Texas

AREA CODE & TELEPHONE NO.

AREA CODE & TELEPHONE NO.

(806) 555-4221

(915) 859-3942

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

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

	TAG PREFIX	Tag NO.	COLOR DESCRIPTION						BREED/TYPE						SEX			BRANDS Tattoos, etc.	REMARKS include existing conditions
			Bay	Grey	Blk.	Pinto	Chestn	Other	TB	QT	Draft	Pony	Other	Mare	Stal	Geld			
1	USGT	7431			✓								✓	✓				24 057949	
2		7901					Dun						✓			✓		049896	
3		7439					Dun						✓	✓				059860	
4		7440					✓						✓			✓		104307	
5		7441					✓						✓	✓				096494	
6		7442					✓						✓			✓		091910	
7		7443	✓										✓	✓				104388	
8		7444					✓						✓	✓				055114	
9		7445					✓						✓	✓				099965	
10		7446					✓						✓			✓		096852	
11		7447					✓						✓	✓				073780	
12		7448					✓						✓	✓				099403	
13		7449					✓						✓	✓				044089	
14		7450						Roan					✓			✓		049997	
15	USGT	7451					✓						✓	✓			24 093366		

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

(b)(6)

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN
FRONTERAS (DGIF)

EST.

DATE

TIME

AND THE INFORMATION IN IT AS
N OF THIS FORM OR KNOWINGLY
ULT IN A FINE OF NOT MORE THAN
TH (18 U.S.C. SECTION 1001).

(b)(6)

contained in this form is true and correct to

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

7/11-19/31

**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	USGT	1452			✓								✓	✓			et 7/11	090285
17		1453											✓	✓				094252
18		1454					✓						✓	✓				089712
19		1455						BRN					✓	✓				088837
20		1456					✓						✓		✓			092938
21		1457					✓						✓	✓				062083
22		1458						BL					✓	✓				061260
23		1459				✓							✓	✓				054123
24		1460											✓		✓			087022
25		1461				✓							✓		✓			105496
26		1462						BL					✓		✓			096084
27		1463					✓						✓		✓			102390
28		1464						BL					✓		✓			088630
29		1465					✓						✓	✓				094575
30		1466					✓						✓		✓			095703
31		1467					✓						✓	✓				046513
32		1468					✓						✓		✓			087551
33		1469						BRN					✓	✓				049719
34	USGT	1470					✓						✓	✓			et 7/11	060477
35																		
36																		
37																		
38																		
39																		
40																		
41																		
42																		
43																		
44																		
45																		

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

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



Health Certificate No. 711-19132
(Valid only if the USDA Veterinary Seal
Appears over the Certificate Number)

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

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

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

1. Name and Address of Exporter:
Nombre y Dirección del Exportador:

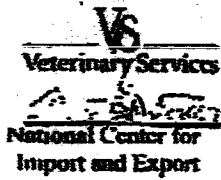
Beltex Corporation
3801 N Grove
Fort Worth, Texas 76106
2. Name and Address of Importer:
Nombre y Dirección del Importador:

Empacadora de Carnes de Fresnillo, SA de CV
Avenida Plateros #480, Zona Centro
Fresnillo, Zacatecas
Mexico, C.P. 99000
3. Identification of the animals to be exported / *Identificación de los animales a ser exportados.*

Microchip number / Número de microchip	Sex/Sexo	Approximate age/Edad aproximada	Microchip Number / Número de microchip	Sex / Sexo	Approximate age/ Edad aproximada
062293	mare	144months	088570	mare	120months
054438	mare	144months	096213	mare	96months
096512	gelding	108months	095477	mare	60months
088906	mare	96months	054709	mare	144months
101894	mare	108months	044244	mare	120months
086770	mare	120months	096730	mare	120months
104928	mare	108months	085006	mare	144months
082867	mare	120months	058598	mare	84months

Mexico, Slaughter horse HC

4/25/11



Health Certificate No. 711-19132
(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 aproximada</i>	Microchip Number / <i>Número de microchip</i>	Sex / <i>Sexo</i>	Approximate age/ <i>Edad aproximada</i>
053872	mare	144months	091439	mare	24months
103512	mare	84months	095895	mare	96months
098108	mare	144months	087182	mare	120months
055712	mare	144months	105135	mare	132months
085340	mare	96months	052267	mare	144months
088640	mare	132months	092388	mare	120months
056139	mare	132months	060564	mare	144months
081724	mare	96months	041884	mare	144months
Total:32hd					



Health Certificate No. 711-19132
 (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 22, 2011

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

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

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

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

(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)

2/2/11

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

(b)(6)

4/25/11

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

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

**AFFIDAVIT
DECLARACIÓN JURADA**

I (print) ^{(b)(6)} [redacted] Beltex Corp declare that the horses included in this shipment accompanied by the health certificate number T11-19132 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 T11-19132 no han sido alimentados o tratados con ninguno de los siguientes compuestos, plantas o medicamentos durante los ciento ochenta días antes del embarque.

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

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

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

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

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

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

Date and signature of the exporter
Fecha y firma del exportador

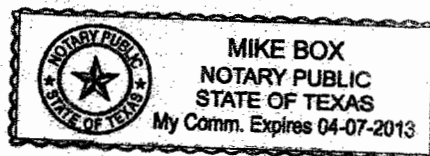
^{(b)(6)} [redacted]

4/22/2011

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

^{(b)(6)} [redacted]

4/22/2011



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

7/11-19/132

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	7471	✓									✓	✓					062293	
2		7472	✓									✓	✓					088570	
3		7473	✓									✓	✓					054438	
4		7474					✓					✓	✓					096213	
5		7475		✓								✓			✓			096512	
6		7476						Roan				✓	✓					095477	
7		7477		✓								✓	✓					088906	
8		7478						Blk				✓	✓					054709	
9		7479	✓									✓	✓					101894	
10		7480				✓						✓	✓					044244	
11		7481			✓							✓	✓					086770	
12		7902		✓								✓	✓					096730	
13		7483						Roan				✓	✓					104928	
14		7484						Dun				✓	✓					085006	
15	USGT	7485	✓									✓	✓					082867	

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

SIGNATURE

I HEREBY
COMPLET
USING A
\$10,000 O

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

CANADIAN FOOD INSPECTION AGENCY (CFIA)

EST.

DATE

TIME

DIRECCION GENERAL DE INSPECCION EN
FRONTERAS (DGIF)

EST.

DATE

TIME

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Previous editions are obsolete

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

711-19132

	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	45GT	7480											✓	✓				A ^{pt}	058598
17		7487	✓										✓	✓					053872
18		7488				✓							✓	✓					091439
19		7489				✓							✓	✓					103512
20		7490											✓	✓					095895
21		7491	✓										✓	✓					098108
22		7492					✓						✓	✓					087182
23		7493											✓	✓					055712
24		7494											✓	✓					105135
25		7495											✓	✓					085340
26		7496				✓							✓	✓					052267
27		7497				✓							✓	✓					088640
28		7498			✓								✓	✓					092388
29		7499			✓								✓	✓					056139
30		7500			✓								✓	✓					060564
31		7501					✓						✓	✓					081724
32	45GT	7502											✓	✓				A ^{pt}	041884
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I HEREBY AUTHORIZE THE CFIA TO DISCLOSE THIS DOCUMENT AND THE INFORMATION IN IT AS COMPLETED BY THE CFIA TO THE USDA. FALSIFICATION OF THIS FORM OR KNOWINGLY USING A FALSIFIED FORM IS A CRIMINAL OFFENSE AND MAY RESULT IN A FINE OF NOT MORE THAN \$10,000 OR IMPRISONMENT FOR NOT MORE THAN 5 YEARS OR BOTH (18 U.S.C. SECTION 1001).

Signature (b)(6)

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

VS
(S)

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

Originating Office Phone

Control Number: 4801B9724

512-383-2411

Office Id: 974801

Beltex Corporation

Po Box 427

Service Date(s)

Whiteface

TX 79379

Begin: 25-APR-11

End: 25-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# T1119130, 9131, 9132

Payment Information

Nfc Id
751522503VA

Date	Amount	Payment Type	Account/Check #
01-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.