Serial Number: ____________________
Date of Dispatch:__________________

Affidavit to Transfer EU Product from Slaughter/Cutting/Processing

I, ___________________________________, am the present owner of / producer of / agent for
the identified product and have directly controlled or taken full responsibility for relevant
practices applied in its production. I do affirm that the product covered by this certificate
originated from animals that have never been treated or fed hormonal growth promotants
(anabolic compounds).

USDA Establishment Number: ____________________________

Establishment Name and Address: ____________________________
_____________________________________________________________________

| Type of Product (Carcass, cuts, etc.) | Unique Carcass/Lot Identification | Number of carcasses, cartons, or pieces | Weight | EU Health Mark (list serial numbers, if applicable) | Received with producer/transfer affidavit (list serial number and attach copy) |
|-------------------------------------|----------------------------------|----------------------------------------|--------|------------------------------------------------|--|---|
|                                     |                                  |                                        |        |                                                 |                                      |
|                                     |                                  |                                        |        |                                                 |                                      |
|                                     |                                  |                                        |        |                                                 |                                      |
|                                     |                                  |                                        |        |                                                 |                                      |

Transfer to: Cutting Establishment (Est. No): _______________
Further Processing Establishment (Est. No): _______________

I certify that all statements made herein are true to the best of my knowledge.

SIGNATURE: ____________________________ Date: _______
Printed Name and Title: ____________________________

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

1 Circle one
2 If the animals/product have been owned by or under control of other persons or premises, a copy of the
producer affidavit for each transfer of ownership is attached.