TRANSFER OF CARE REPORT

<u>Disclaimer:</u> This document is only needed for auction marts, slaughter facilities, or assembly centers and must include the following information: Date and time of arrival, condition of animals, and date and time of the last feed/water and rest. This document is to be retained by the receiver for a period of two years.

| | □ If no, please complete the box below |
|---|--|
| ition YES NO | ☐ If no, please complete the box below |
| ition YES NO | ☐ If no, please complete the box below |
| ition YES NO | ☐ If no, please complete the box below |
| | |
| Condition of animals upon arrival, including any dead animals, and actions taken to address prior to arrival: | |
| Transporter Signature: | Receiver Signature: |
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| • | ccurs immediately upon acknowledgemen |
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