

Illinois Department of Agriculture
Division of Meat, Poultry & Livestock Inspection
**CERTIFICATE OF EXAMINATION OF POULTRY
OWNER OR EXHIBITOR**

Name & Location of Show

Number Entered _____ Breed _____ Species _____

Band No. of each bird: _____

If more space is needed, use reverse side

These birds were tested by: _____
Name

Address _____ Date _____

Birds came from the Pullorum-Typhoid Clean flock of:

Name of Flock Owner

Address of Flock Owner

On _____ 20____, I inspected the listed poultry entries and source of flock or flocks and to the best of my knowledge, found them free from any evidence of and not recently exposed to, Newcastle disease or any other infectious or transmissible disease.

Name of Flock Owner or Exhibitor

Address

The inspection date must be within 5 days of admission to the above show.

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