

## Kansas Department of Agriculture Division of Animal Health agriculture.ks.gov/animalhealth

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## **Bull Status Affidavit for Change of Ownership or Possession Purposes**

			Date
In order for bulls to change ow slaughter or feeding, they mus			r into or within Kansas for any purposes other than lined in K.A.R. 9-7-4a.
I declare the bulls I am present following requirements, or wil	_		ssession on the above date will meet at least one of the ghter purposes only.
Please check all that apply			
Are virgin bulls 18 mor	nths of age or	younger with i	no sexual exposure to breeding-aged females since weaning
Are virgin bulls 24 mor			riginate from a herd with a herd management plan
Nam	ne of approve	d operation:	
days, with results accor	mpanying this	s movement, an	tified veterinarian and certified negative within the past 60 d no subsequent exposure to female cattle
correct and true to the best of i			_
Owner or Authorized Represen	ntative name	(print)	
Physical Address			
City	State	Zip	
Phone			
Signature		. Date	