Supplier #: _____

Document No. SRNat 007, Version 6
Revision Date 12/23/10

TYSON FRESH MEATS NATURAL AFFIDAVIT

This affidavit must be completed by approved producers, growers, and feedlots upon shipment of cattle to a feedlot or licensed packing plant.

Cattle eligible for CABN program MUST be of Black Angus influence based on phenotype, appearance MUST be 51% or more black. Red, yellow, white, or grey cattle do not qualify without AngusSource® program enrollment. Eligibility is based on individual qualifications not group, pen, load, or lot. Cattle enrolled in the AngusSource® program to verify genotype are also eligible.

Cattle eligible for Open Prairie Natural program MUST meet the requirements of CABN stated above or display Registered Angus parentage (black or red) with Natural Angus Beef Genotype Cattle Certification [SRNat 010] or Red Angus phenotype of solid red or red baldy. Cattle must be approved by a Tyson representative. Eligibility is based on individual qualifications not group, pen, load, or lot.

I, *(manager or owner name-PRINT)*: _____

(Signature) _____ Date: ____/____/____

Address: _____ City: _____ State: _____ Zip: _____

As an approved:

☐ **Original Producer** (ranch of birth) ☐ **Backgrounder/grower** (only check if cattle grown were NOT born on premise) ☐ **Feedlot** (finish cattle only)

☐ **Global Animal Partnership** **Certificate #**_____ **Expiration Date:**_____

---------- (Put an X in the box for all that apply for the cattle referenced below) ----------

have abided by the following production procedures listed in 1, 2, 3, & 4 below <u>while under my care</u> to qualify the animals identified on this document as eligible, in part, to supply natural cattle and are of U.S.A. origin:

1. In raising these animals, the following <u>have never been used</u> while under my care:
   a. Supplemental hormones, of any kind, in the feed or via implant
   b. Steroids and beta-agonists
   c. Antibiotics, including ionophores, either therapeutic or sub-therapeutic
   d. <u>Animal-derived feedstuffs</u>, of any kind
2. The feed used for these animals did not come in contact with conventional feeds containing any of the above mentioned items; and the proper documentation (i.e. feed labels, feed supplier affidavits, etc.) to confirm compliance with production claims has been kept and will be available for a period of two years.
3. These animals are individually identified and all animals receiving medication or deemed ineligible for any reason have been identified. Good animal husbandry practices have been followed to provide proper housing, good nutrition, and low stress handling to ensure each animals health and well being has been maintained.
4. I attest that all livestock referenced by this document and transferred are of U.S.A. origin (i.e., born and raised in the U.S.A.).

The undersigned, previously agreeing to adhere to these rules, confirms that to the best of their knowledge the cattle identified below meet each of the requirements and will cooperate to determine the cause of any problems that might arise that would lend doubt to the eligibility of any of the cattle referenced by this document.

(Circle One)

Lot #/Group ID: _____ **Head Count:** _____ **Sex:** STR HFR MXD **Ship Date:** _____

To be completed only by the producer of origin

Animal Age: These cattle were born between the dates listed below as established using the method indicated.

Birth Date Range (m/d/y): ____/____/____ to ____/____/____

Determined using: Individual Animal ID Group Breeding Records Group Calving Records

Ranch Ear Tags *(Check all that apply)*: ☐ Yes ☐ No ☐ R Ear ☐ L Ear **Ear Notch:** ☐ Yes ☐ No ☐ R Ear ☐ L Ear

Describe ear tags (color, #'s, etc):_____

Ranch Brand: ☐ Yes ☐ No **Draw Brand & Indicate Brand Location:** _____

SUBMITTED by: _____ _____ _____
Seller's Signature Phone # Date

RECEIVED by: _____ _____
Buyer's Signature Date