**Ruminant Livestock Slaughter Eligibility Verification Affidavit**

Complete this form when selling any ruminant livestock. Provide a copy of this form to the buyer and retain a copy, and all supporting documentation, for your records which will be verified at inspection.

**NOP §205.236 Origin of Livestock -** Livestock products that are to be sold, labeled, or represented as organic must be from livestock under continuous organic management from the last third of gestation. The producer of an organic livestock operation must maintain records sufficient to preserve the identify of all organically managed animals, including whether they are transitioned animals, and edible and nonedible animal products produced on the operation.

|  |  |
| --- | --- |
| **Sellers Operation Name:** |  |
| **Buyers Operation Name:** |  |
| **Date of Transaction:** |  |

**To be completed by the seller:**

1. Number of head covered by this affidavit: 
   1. Individual animal IDs (*ie: Ear Tag #s*):

|  |
| --- |
|  |
| List ID’s |

1. All animals listed under this affidavit have been managed organically from the last third of gestation.

Yes  No

*Note: any animal that has been transitioned to organic production is not eligible for organic slaughter.*

1. Have any of the animals listed under this affidavit been given any synthetic parasiticides?   
   (*i.e.: Fenbendazole, Moxidectin, Ivermectin, etc.*)   
     Yes  No

*Note: the use of allowed synthetic parasiticides is prohibited in organic slaughter stock.*

1. Have any allowed medications been administered to the livestock listed under this affidavit which requires a meat withdrawal per the regulation at NOP §205.603?

Yes (complete the table below)

No

|  |  |  |  |
| --- | --- | --- | --- |
| Medication (organic meat withdrawal time) | Livestock ID(s) | Date administered | Withdrawal end date |
| Atropine (56 days) |  |  |  |
| Butorphanol (42 days) |  |  |  |
| Tolazoline (8 days) |  |  |  |
| Xylazine (8 days) |  |  |  |
| Flunixin/Banamine (8 days) |  |  |  |
| Lidocaine (8 days) |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Important Information Regarding Electronic Signatures:** Oregon Tilth recognizes and permits the use of electronic signatures in the conduct of its business. By checking the box below, you willingly consent to the use of electronic signatures in the conduct of your business with Oregon Tilth.  **AGREE** | | | | |
|  | |  | | |
| **Seller’s Name (printed/typed)** | | **Date:** | | |
|  | |  | | |
|  | | | | |
| **Seller’s Signature** | | | | |