

Kansas Department of Agriculture Division of Animal Health

agriculture.ks.gov/animalhealth

1320 Research Park Drive Manhattan, KS 66502 Phone: (785) 564-6601

Fax: (785) 564-6778

Domesticated Cervid Movement Notice

For Intrastate Movement Only

K.A.K. 9-3-9 (g) Each doinesticated cervid, arive of dead, transported within the state of Kansas shall be accompanied
by a completed transportantion notice signed by the shipper on a form provided by the Kansas department of agriculture, division of animal health.

Movement da	ate:	License number:					
Shipper (Licensee) name:							
Address moved from:							
City, State:							
Shipper's signature:							
Receiver name:							
Address moved to:							
City, State:							
License number of receiver (for all live animal movement not going directly to a slaughter establishment):							
Reason for Movement (check one)							
☐ Breeding or Stocking purposes* ☐ Exhibition*							
☐ Direct to slaughter ☐ Deceased animal from hunting preserve							
Deceased animal from a licensed Kansas premises that is not considered a hunting preserve							
Other (explain)*							
*Must meet TB testing requirement prior to movement TB Test Date:							
Animal Information							
Species	Age	<u>Sex</u>	Official ID Number	Additional ID Number			

(If more than 5 animals please use continuation form)

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Domesticated Cervid Movement Notice - (continued)

Movement date: _____ License number: _____

<u>Species</u>	Age	<u>Sex</u>	Official ID Number	Additional ID Number

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