

DOMESTICATED DEER MOVEMENT NOTIFICATION

For Intrastate Movement Only

Movement date:	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 live animals shipped):			
Reason for Movement (check one)			
Breeding or Stocking purposes	_Exhibition		
Direct to slaughter	_ Deceased animal from hunting preserve		
Deceased animal from a licensed Kansas premi	ises		
Other (explain)			
Animal Information			
Species Official Identification Numb	er <u>Additional Identification Number</u>		

(If more than 5 animals please use continuation form)

Create copies: 1-Retained by seller 1-Accompanies shipment 1-Sent to KDA

Return by mail to Kansas Department of Agriculture, Division of Animal Health, 1320 Research Park Dr., Manhattan, Kansas 66502 or by email to jennifer.ukena@kda.ks.gov *no later* than 10 days of shipment.



DOMESTICATED DEER MOVEMENT NOTIFICATION - (continued)

Movement date:	License number:		
Species	Official Identification Number	Additional Identification Number	