

**REPORT FOR AN ANIMAL MARKED****NBAS 26****“UNCONFIRMED DEAD”****Section 1.** *To be completed by reporting Authority:*Abattoir/Meat plant,
Export Lairage No. or DVO

TAGNUMBER

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HEIFER / BULLOCK / COW / BULL (*delete as appropriate*)PRESENTED FOR SLAUGHTER/EXPORT/PREMIUM/REPLACEMENT CARD/TAG AT
(*delete as appropriate*)

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(insert name of location)

ON

/	/	/
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(insert date)

BY

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(insert herdnumber)

NAME

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(insert name of presenter)

HAS BEEN FLAGGED AS AN UNCONFIRMED DEAD ANIMAL ON THE CMMS

Section 2. *To be completed by DVO*THE ANIMAL MENTIONED ABOVE IS CURRENTLY LOCATED IN THE HERD NAMED ABOVE AND
WAS NOT RECORDED ON THE CMMS ON OR AFTER THE 31/12/00 FOR THE FOLLOWING
REASON(S).

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I AM SATISFIED THAT THIS ANIMAL IS CURRENTLY LOCATED IN THE HERD MENTIONED
ABOVE AND IT HAS BEEN TESTED IN THIS HERD ON THE FOLLOWING DATES (*please give last two
dates of test in herd*)

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/	/
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Official Stamp

SIGNED _____

Name _____
(Please Print)

Phone No. _____

Section 3. *To be completed by NBAS*

ANIMAL REMOVED FROM UNCONFIRMED DEAD

ANIMAL TABLE ON _____ (*date*)BY _____
(*signature*)NOTIFIED TO DVO ON _____ (*date*)