Samson, LLC PVP

MCDL 07-31-18

Producer Shipping Affidavit

PVP Approval No.: PV3032HTA
Date of Shipment: __2023-06-18__
Harvest Date (if applicable): __2023-06-19__

Affidavit Number: __30106__

http://processverified.usda.gov/

Program Eligibility: *Check the appropriate program*

_X_ Cattle Meet the Ranch of Origin Requirements (Source)
  _X_ Program tagged at the ranch of origin.
_X_ Cattle Meet the Date of Birth Requirements (Age)
_X_ Cattle Meet EV Program Requirements for the EU (NHTC Approval #NH5306NNA)
___ Cattle Meet the Requirements to be classified as Samson Verified Natural
___ Cattle Meet the Vet Quality Assurance Requirements
  ___ Plus the Mineral Feeding Requirement
_X_ Animals Meet the Requirements of the Livestock Feeding Claim Audit Program for EU High Quality Beef or Bison
  _X_ Beef or Bison as defined by QAD 1040 Procedure, Sec. 7.2.1 Quota A
  _X_ Beef as defined by QAD 1040 Procedure, Sec. 7.2.2 Quota B
  _X_ Sec. 7.3 Never Fed Beta Agonists Claim
  _X_ Direct Fed Microbial used during the last 100 days on feed
_X_ Cattle Meet the Requirements of Not Been Fed with Prohibited Animal Protein Post-weaning
  _X_ Meets the Requirements of the EV Program for Saudi Arabia

Total Number of Animals Shipped on this load: _____
Total Number of Animals on Manifest: __334__

Genotype: __Unknown: 100%__

Country of Origin (Born): __KS USA__ Country of Origin (Raised): __KS USA__

Ranch(es) of Origin: 1) ___Peters Cattle Company___

Peters Cattle Company is the supplier of the identified animals and have directly controlled or taken full responsibility for relevant practices applied in their handling. I do affirm that the animals covered by this certificate have not had their PVP tags altered while under my control.

Name: Ryan Peters
Company: Peters Cattle Company
Address: 1875 N Chisholm Trail Rd
City / State / Zip: Lehigh, KS 67073
Phone: 620-483-3036
Fax:
Cell: 620-654-7443

Birth date of oldest calf on the manifest: __2020-12-26__

Age in Months _29_ & Days_23_ on _2023-06-19__

Group IDs: _pecaco21 221209, pecaco22 230410, pecaco21 230410_

Sub-Group IDs: _,__

Transfer to: Company: __Tyson - Lexington 245L__
Address: 1500 Plum Creek Pkwy
City / State / Zip: Lexington, NE 68850
Fax: _____ Phone: 308-324-8102

I certify that all statements made herein are true.

SIGNATURE:_____
Date:_____

Printed Name and Title: Ryan Peters, Owner, Peters Cattle Company