

**KILLED SMALL WILD GAME**

**A. Filled in by a trained person in the place of hunting**

Confirmation No: .....

Hunter’s name and address: .....

Date of killing: .....

Hunting district: ..... Hunting permit No: .....

Species:	Quantity:	Time of killing:
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

No abnormal behaviour was observed before killing. I confirm that neither infectious animal disease control restrictions nor quarantine apply in the wild game hunting district.

Date of initial control: .....

Wild game handling destination address: .....

Name and signature of initial controller: .....

**B. Filled in by an official veterinarian in the handling premises**

I confirm that the skinned or plucked<sup>1</sup> wild game carcass described in part A is without pathological findings.

Number and net mass of carcasses: .....

Official veterinarian’s name and signature: .....

Official veterinarian’s stamp: .....

Date of veterinary control: .....

Name of trichinosis sampler, name of analyser, date of analysis, and number of the test report.....

<sup>1</sup> Correct version will be underlined