

NORTH DAKOTA EXEMPTION CERTIFICATE

I HEREBY CERTIFY:

1. I am engaged in the care and treatment of food animals.
2. All the drugs and/or medicines for the prevention or control of disease that I purchase from *MWI Animal Health* will be administered to animal life of a kind that ordinarily constitute food for human consumption.
3. This certificate shall be considered a part of each order that I give unless such order shall otherwise specify.
4. This certificate shall be good until I revoke it in writing.

Name of Purchaser:	
Signature of Purchaser:	Date:
Printed Name of Person Signing:	Title:
Address of Purchaser:	
Sellers permit Number (if any):	