

Animal Remedies Usage Records

Date of Administration	Name and Quantity of Animal Remedy Administered per Animal		Identity of Animal given Remedy (including the ear tag no. or a clear reference to it). State Number of Animals if Batch Treatment	*Date of End of Withdrawal Period (if any)		Name of Person Administering the Remedy	Name of Prescribing Veterinary Surgeon (if applicable)	Condition Treated (Optional)
	Remedy Name	Quantity		Meat	Milk			
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								

*Note: Please insert the date of the end of withdrawal and not the length of the withdrawal period (e.g. insert 21/08/2017 and not 28 days).