



# Meyer Natural Angus Program

Meyer Natural Foods  
1990 Rocky Mountain Ave • Loveland, CO 80538  
Phone: (970)292-5006 • FAX: (970)292-5542

Affidavit # \_\_\_\_\_

Contract # \_\_\_\_\_

## Cattle Affidavit

All producers must sign and complete in full their appropriate segment of this affidavit. Completed affidavit must be provided to an MNF Representative.

For Office Use Only

### Before completing and signing, read this section carefully to ensure your cattle uphold MNF Standards:

- 50% Red or Black Angus Genetics (Determined by using the simple average of the Angus Genetics in the Sire and the Dam.)
- Never received ionophores, antibiotics, or beta-agonists.
- Never been administered any growth implants or hormones.
- Vegetarian Fed: No Mammalian, Fish, or Avian By-Products with the exception of milk or milk derived products.
- No Dairy influence.
- No bulls or stags.
- Raised in accordance with MNF Humanely Handled Standards.
- Have been fed an MNF Approved E.coli reduction product during the finishing phase.
- Born and Raised in the USA.
- Less than 30 months of age at slaughter.
- Management records kept for minimum of 3 years.

**Producers are subject to on-site evaluations on all Standards included on this affidavit.**

### Cow/Calf Producer: *(Please print) This is the location at which the cattle were born.*

Name: \_\_\_\_\_ Ranch: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of First Calf Born: \_\_\_\_\_ Sex (check one):  Steer  Heifer  Mixed

If Producer finished cattle at home, approved E.coli reduction product used: \_\_\_\_\_

Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

### Backgrounder: *(Please print) If grown at a location other than home ranch or feedlot, complete this section.*

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

### Feedlot: *(Please print) If cattle finished at a location other than home ranch, complete this section.*

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Lot # (if applicable): \_\_\_\_\_ Approved E.coli reduction product used: \_\_\_\_\_

Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_