

DEPARTMENT OF LIVESTOCK

PO BOX 202001
 HELENA, MONTANA 59620-2001
 www.liv.mt.gov



DEPARTMENT OF LIVESTOCK (406) 444-7323
 ANIMAL HEALTH & FOOD SAFETY DIVISION (406) 444-2043
 BRANDS ENFORCEMENT DIVISION (406) 444-2045
 CENTRALIZED SERVICES DIVISION (406) 444-4993
 FAX (406) 444-1929

DSA Brucellosis Test/Adult Vaccination Reimbursement Request for Veterinarians

Instructions:

1. Form is for testing or adult vaccination conducted July 1, 2017 thru June 30, 2018 (FY 18)
2. Submit requests within 60 days of test AND prior to July 1, 2018.
3. Submit complete vaccination certificates with all adult vaccination requests.
4. Reimbursement rates: \$8.50/head tested at a market, \$4/head for adult vaccination, testing on ranch \$12/head for 1-10 head, \$10/head for 11-50 head, \$7.50 for >50 head,
5. Be as specific as possible with Reason for Test.
6. Use continuation pages if submitting reimbursement for more than 9 tests/vaccinations at a time.

Make check payable to: _____

Date submitted: _____

Address: _____

Phone: _____

City/State/Zip: _____

Veterinarian Signature _____

Owner/Ranch/Market Name	Acc.#/Case #	# Head	Reason for Test	Total Amt
LID/PIN	Blood Draw Date	Rate	(Please be as specific as possible)	
1				
2				
3				
4				
5				
6				
7				
8				
9				

Return form to Emily Kaleczyc: ekaleczyc@mt.gov, fax: (406) 444-1929, PO Box 202001, Helena MT 59620-2001

TOTAL: \$

PAGE _____ of _____

Office Use Only:

SV-15 (revised 1/18) Total Epi: _____ Total DSA: _____ Total: _____