MONTANA DEPARTMENT OF LIVESTOCK ANIMAL HEALTH DIVISION PO Box 202001, Helena MT 59620-2001 www.liv.mt.gov

## 2025 MONTANA JOHNE'S HERD MANAGEMENT RENEWAL APPLICATION



Owner Name		Ranch or Business Name
Mailing Address		Physical Address
City, State, Zip		City, State, Zip
Phone Fax		Email
	_	HE PREVIOUS YEAR. APPLICATION AND TESTING MUST BE SENTED PARTICIPATION EXPIRES 30 DAYS AFTER THE RENEWAL DAT
	Herd In	nformation
Number of cows 2 years of age and older:		
Number of bulls 2 years of age and older:		
Source of replacements:		
Bull source:		
Johne's status of bull		
source known?		
confirm that no changes have Changes in livestock manage be agreed upon by all signing	been made to the original ment or other factors may parties.  Treed upon management	ay warrant an update to the herd plan. Modifications must
Herd Owner		Date
Veterinarian		Date
Montana State Veterinarian	or designee	Date