



Armor Livestock Pharmacy
 1240 Green Valley Rd, Beaver Dam, WI 53916
 Phone 866.986.9404
 Fax 920.569.0112

Per Regulations:
 ALL FIELDS MUST BE COMPLETED. A VET SIGNATURE IS REQUIRED.
 PRN REFILLS ARE NO LONGER ACCEPTED BY MANY STATES. PLEASE INDICATE SPECIFIC QUANTITY FOR REFILLS.
 "USE AS DIRECTED" IS NO LONGER ACCEPTED BY MANY STATES. PLEASE INDICATE INSTRUCTIONS.

Producer/Farm Name: _____
Address: _____
City/State/Zip: _____
Phone Number: _____
Email: _____

Vet Signature: _____
Vet Name: _____
Clinic Name: _____
Address: _____
City/State/Zip: _____
Phone Number: _____

Date: _____
Vet License Number: _____
Vet License Exp. Date: _____

This prescription will be filled generically unless prescriber writes "DAW" in the box

Dispense as written

Drug	Strength	Quantity Approved	# of Refills	Milk withhold	Meat Withhold	Directions	Animal Group-Please circle	Expiration date
							Adult Dairy cattle, Youngstock, Beef, Dairy, Veal or Other-Specify	
							Adult Dairy cattle, Youngstock, Beef, Dairy, Veal or Other-Specify	
							Adult Dairy cattle, Youngstock, Beef, Dairy, Veal or Other-Specify	
							Adult Dairy cattle, Youngstock, Beef, Dairy, Veal or Other-Specify	
							Adult Dairy cattle, Youngstock, Beef, Dairy, Veal or Other-Specify	
							Adult Dairy cattle, Youngstock, Beef, Dairy, Veal or Other-Specify	
							Adult Dairy cattle, Youngstock, Beef, Dairy, Veal or Other-Specify	
							Adult Dairy cattle, Youngstock, Beef, Dairy, Veal or Other-Specify	
							Adult Dairy cattle, Youngstock, Beef, Dairy, Veal or Other-Specify	
							Adult Dairy cattle, Youngstock, Beef, Dairy, Veal or Other-Specify	

We would like to thank you for giving us the opportunity to work with you by providing prescriptions. ARMOR Livestock Pharmacy provides a Prescription Usage Report to each prescribing veterinarian. This report lists any prescription drugs that you have approved for your client and the quantity of each particular drug used during the current prescription period.

1. How often would you like to receive this report?
 Monthly Quarterly or Yearly

2. Email address to receive the report?

Email / Email Address: _____

If at any time you have any questions or even suggestions please feel free to contact us.