

Mississippi Secretary of State
700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

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|---------------------------------------|-------------------------|--|-----------------------------------|--------------|
| AGENCY NAME Board of Animal Health | | CONTACT PERSON James A. Watson, D.V.M. | TELEPHONE NUMBER (601)359-1160 | |
| ADDRESS P.O. Box 3889 | | CITY Jackson | STATE Miss. | ZIP 39207 |
| EMAIL jimw@mdac.state.ms.us | SUBMIT DATE 01-26-12 | Name or number of rule(s): Testing for equine infectious anemia | | |

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: Revises credentials for veterinarians testing for equine infectious anemia

Specific legal authority authorizing the promulgation of rule: Miss. Code of 1972, §69-15-3

List all rules repealed, amended, or suspended by the proposed rule: Subpart 2, Chapter 10, Section 101

ORAL PROCEEDING:

An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____

Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

Economic impact statement not required for this rule. Concise summary of economic impact statement attached.

| TEMPORARY RULES | PROPOSED ACTION ON RULES | FINAL ACTION ON RULES |
|--|---|--|
| _____ Original filing _____ Renewal of effectiveness To be in effect in _____ days Effective date: _____ Immediately upon filing _____ Other (specify): _____ | Action proposed: _____ New rule(s) <input checked="" type="checkbox"/> Amendment to existing rule(s) _____ Repeal of existing rule(s) _____ Adoption by reference Proposed final effective date: <input checked="" type="checkbox"/> 30 days after filing _____ Other (specify): _____ | Date Proposed Rule Filed: _____ Action taken: <input type="checkbox"/> Adopted with no changes in text <input type="checkbox"/> Adopted with changes <input type="checkbox"/> Adopted by reference <input type="checkbox"/> Withdrawn <input type="checkbox"/> Repeal adopted as proposed Effective date: _____ 30 days after filing _____ Other (specify): _____ |

Printed name and Title of person authorized to file rules: James A. Watson, D.V.M., State Veterinarian

Signature of person authorized to file rules: *James A. Watson*

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| <p>OFFICIAL FILING STAMP</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>Accepted for filing by _____</p> | <p>DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP</p> <div style="border: 1px solid black; padding: 10px;">  </div> <p>Accepted for filing by <i>CB18418E</i></p> | <p>OFFICIAL FILING STAMP</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>Accepted for filing by _____</p> |
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The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.