

DELAWARE COUNTY 4-H LIVESTOCK IDENTIFICATION REPORT

(Use this form for breeding heifers, cow/calf, bucket/bottle calf, pets, rabbits, goats & poultry)

DEADLINE: This form must be received at Delaware County Extension Office by 4:30 p.m. May 15.

MEMBER'S NAME _____

ADDRESS _____ GRADE _____

NAME OF CLUB _____ DATE FILLED IN _____/2009

I hereby certify that I own, feed and care for the following animals as part of my 4-H projects. I understand that the animals that I exhibit at 4-H shows during the project year shall be among those listed and described on this form.

Signature of 4-H member

Signature of Parent/Guardian

"I verify my child's statement."

BREEDING HEIFERS

REGISTERED or COMMERCIAL	EARTAG or TATTOO NUMBER <small>(do not use calfhood vaccination number)</small>	EARTAGGED or TATTOOED <small>R = RIGHT EAR L = LEFT EAR B = BOTH EARS</small>	BIRTH DATE MO/DAY/YEAR	BREED	REGISTRATION NUMBER <small>(if registered)</small>

COW-CALF

	YEAR SHOWN AS HEIFER	EARTAG OR TATTOO NUMBER <small>(do not use calfhood vaccination number)</small>	BIRTHDATE MO/DAY/YR	BIRTH WEIGHT	SEX	BREED
Cow				XXXXXX	XXX	
Calf	XXXXXXX					
Cow				XXXXXX	XXX	
Calf	XXXXXXX					
Cow				XXXXXX	XXX	
Calf	XXXXXXX					
Cow				XXXXXX	XXX	
Calf	XXXXXXX					

BUCKET/BOTTLE CALF

BREED	BIRTHDATE	SEX	EARTAG NUMBER	NAME

PETS *(All Dogs Must Also Be Identified On the Dog Identification Form)*

