



LIVESTOCK AUCTION MARKET
P.O. Box 30
Ogallala, Nebraska 69153

Bus: (308)-284-2071

Fax: (308)-284-2079

LIVESTOCK DATA SHEET

Livestock Owner: _____

Birth Date Range: _____

Breed: _____

Total Head Count: _____ Sex (circle one): Steer Heifer Mix

I declare that I have the following records available:
CHECK BOX FOR RECORDS YOU HAVE AVAILABLE

<input type="checkbox"/>	Birth Records	<input type="checkbox"/>	Health Records
<input type="checkbox"/>	Purchase Records/Receipt	<input type="checkbox"/>	Brand Information
<input type="checkbox"/>	Individual Ear Tags	<input type="checkbox"/>	Records of animals' location while in my possession
<input type="checkbox"/>	Sale Records	<input type="checkbox"/>	Other Records (describe below)
Comments: _____			

VACCINATION HISTORY:

	PRODUCTS	DOSE	ROUTE OF ADMIN	DATE OF ADMIN
BRANDING				
PRE-COND.				
RE-VACC				

I declare that these animals have not been fed any form of animal by-products including but not limited to items listed by the **FDA rule Title 21 Section 589-2000**.

Ranch or Contact Name: _____

Address _____ Phone: _____

City _____ State _____ Zip _____

_____ Date _____

SIGNATURE