

4-H CLUB BORROWED ANIMAL IDENTIFICATION FORM

June 15 (Columbia)

Complete both front and back then return to:

CCE Extension Education Center, 479 Rt 66, Hudson NY 12534 or FAX to 518-828-3069

Complete a separate form for each donor farm/animal owner.

4-H Club Name: _____ Year: _____

Project Leader(s): _____

Farm Name/Animal Owners: _____

Species	Breed	Date of Birth	Tattoo/I.D.	
			Right Ear	Left Ear
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

--OVER--

Please list the 4-H Members who will be exhibiting the project animals on the previous page.

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[illegible]