## **LIVESTOCK ENTRY FORM**

Exhibitor Address					ANNIVERSARY &			
City		State		Zip	- Ti Al			
Phone		E-mail				at moust	the	- ossee Ar
Birth Date	(If Minor)				-,	ewart	: - Tel	Jues
	Exhibitor #:				-	·LI		-
	•	_						
								/r orr: /
						I	Entry	(for Office)
Section	Class	Name of Animal	BREED	Tattoo/Tag #	Date of Birth	Sex		Entry #
BEEF	•				•			
DELI								
SHEEP					_		•	
GOAT	1 1				ı			
SWINE							•	
					TOTAL	l Entr	, Eggs ¢	
					TOTAL	LEIILIY	y Fees \$	
OFFICE US	E ONLY:							
					AMOUNT			
	CATTLE							
	SHEEP							
	GOAT							
	SWINE	TOTAL to be paid exhibitor:						
		TOTAL TO BE DAID EXHIBITOR:			1	I		