



Last Name		First Name(s) (and 4-H Age(s) if 4-H Project) 4-H Club or FFA Chapter Name County NEBRASKA 4-H or FFA BUCKET CALF OWNERSHIP AFFIDAVIT (Rev. 1/13)							
(Check one)	□ FFA	Λ							
Breed or Breeds Involved or Description of Animals		Birth Date	Official 4-H Ear Tag		FFA EID		Official FFA Tag		
	Sex		Right	Left	Right	Left	Right	Left	Name and Address of Breeder
of Animais	Sex	Date	Kigiti	Leji	Rigm	Leji	Kigni	Leji	ivame una Adaress of Breeder
Signature of Club or Chapter Mo (At least one of those listed at the top of		st sign.)	Signature	of Parent and A	ddress		affidavit-in- 4-H or FFA	accordance-with Program and als	e) submitted this livestock ownership -all-rules-of-the-state,-county-and-Chapter- so has (have) successfully completed a Foo program/test for this period.
					Date				
Phone							Extension Staff or FFA Adviser		