# SALINE COUNTY 4-H and FFA OWNERSHIP AFFIDAVIT – COUNTY ONLY

# BREEDING GOAT

Last Name _____ First Name(s) _____

Premise ID # (required) _____ 4-H Club or FFA Chapter Name _____

| *Breed or Description of Animals* | *Sex* | *Date of Birth* | | *Full Scrapie Number & Registration Number* | *Additional ID Notes on retags, etc.* |
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Exhibitor(s) Signature(s)

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Extension Staff or FFA Advisor

Signature of Parent and Address

_____

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_____

This (these) youth has (have) submitted this livestock ownership affidavit in accordance with all rules of the state, county and Chapter 4-H or FFA Program and also has (have) successfully completed a Youth for the Quality Care of Animals program for this period.

Date_____

Phone # _____