



Last Name		F	irst Name(s	and 4-H A	ge(s) 4-H Club FF	4-H Club FFA Chapter Name		
QCA#			emise ID# ASKA 4-H	I FFA an	d MARKET BEEF OWNERSHIP	AFFID	AVIT (Rev. 1/20)	
Home Raised (HR), County Raised (CR), or Return (R)	Breed or Breeds Involved or Description of Animals	Sex	Weight	Date Weighed	Visual Tag Number/ Full 15 Digit EID Number (Please include both if applicable)	√ if State Fair Animal	State Fair Validation Number	Additional Notes
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	of Club FFA Chapter Member(: e of those listed at the top of this form mu		Sig	nature of Pa	urent and Address	Af 4-J Fo	is (these) youth has (have) submitted fidavit in accordance with all rules of H or FFA Program and also has (have od Animal Quality Assurance progra	the state, county, and Chapter e) successfully completed a m/test for this period.
			Pho	one		Da	nte	
						Extension Staff or FFA Advisor		