			4-H/I	-H/FFA BREEDING BEEF AFFIDAVIT Deadline: June 15th					ſ	□ Phelps □ Gosper		
	Last Name				First Name		(4-H Age)	4-1		H Club or FFA Chapter		
	Last Name				First	Name	(4-H Age)	4-		H Club or FFA Chapter		
	Last Name				First Name		(4-H Age)	4-H Club or FFA Chapter				
	Parent Signature Date				Address Premise ID# <i>REQUIRED BY JUNE 15</i> (call 402-471-2351 to obtain a Premise ID)			Contact Number YQCA# <i>REQUIRED BY JUNE 15</i> (please turn certificate in to office)			_	
Exhibitor Initials (if known)	County Fair	State Fair/ AKSARBEN	Breed or Breeds Involved/Description			Tattoo and Right Ear	/or Ear Tag # Left Ear	Check One		Registration Number	Notes	FFA Animal (check)
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