



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 and FFA BREEDING SHEEP OWNERSHIP AFFIDAVIT
(Rev. 8/16)

Date Born	Sex	Breed or Breeds Involved	Tattoo and/or Ear Tag					Check if Registered Animal	Name & Registration Number of Project Animal	Name and Registration Number			
			Right	Left	Right or Left					Sire	Dam		
					Tattoo	4-H Tag	FFA Tag					EID Tag	Scrapies Tag
7/15/2016	F	Commercial Suffolk	B1234	NEXXX-1234		RT			LT	X	Extensions Example - XXX123456	Extensions Sire - XXX1234567890	Extensions Dam - XXX98765432

Signature of Club or Chapter Member(s)
(At least one of those listed at the top of this form must sign.)

Signature of Parent and Address

Phone _____

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 Food Animal Quality Assurance program/test for this period.

Date _____

Extension Staff or FFA Advisor