



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 FEEDER CALF OWNERSHIP AFFIDAVIT (Rev. 8/16)

Maximum 20 head per member

<i>Date of Birth</i>	<i>Breed or Breeds Involved or Description of Animals</i>	<i>Sex</i>	<i>Weight</i>	<i>Date Weighed</i>	<i>Official 4-H Ear Tag</i>		<i>EID Tag</i>	<i>Name and Address of Breeder</i>
					<i>Right</i>	<i>Left</i>	<i>Left ONLY</i>	

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