

LOGAN COUNTY SWINE IDENTIFICATION FORM

This form must be completed and turned in at the Logan County Extension Office by Friday, May 6, 2005, 5:00 p.m. One form for each exhibitor. Pictures **MUST** accompany this form!!

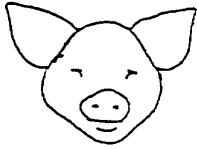
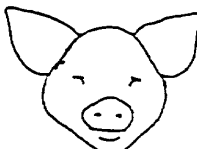


Name _____

4-H Club/FFA Chapter _____

Phone Number _____

Member's Signature

(office use only)

	EAR NOTCH NUMBERS	
	Litter (Right) Individual (Left)	EAR TAG NUMBER
Breed _____ Color Markings _____ Sex _____	 _____ _____	_____
Breed _____ Color Markings _____ Sex _____	 _____ _____	_____
Breed _____ Color Markings _____ Sex _____	 _____ _____	_____
Breed _____ Color Markings _____ Sex _____	 _____ _____	_____

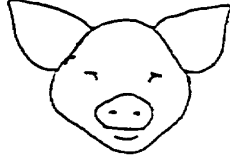

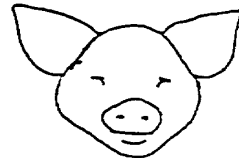
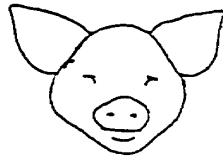
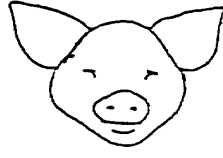

Example:



_____ 15 _____ 7 _____

CONTINUED ON BACK-----

(office use only)

	EAR NOTCH NUMBERS		EAR TAG NUMBER
	Litter (Right)	Individual (Left)	
Breed _____ Color Markings _____ Sex _____		_____	_____
Breed _____ Color Markings _____ Sex _____		_____	_____
Breed _____ Color Markings _____ Sex _____		_____	_____
Breed _____ Color Markings _____ Sex _____		_____	_____
Breed _____ Color Markings _____ Sex _____		_____	_____
Breed _____ Color Markings _____ Sex _____		_____	_____

Example:

