CLARE COUNTY LIVESTOCK AUCTION

RECORDED VACCINATION & PRE-CONDITIONING PROGRAM FORM

2014 Spring Feeder Sale Dates: January 9th, March 20th, April 17th, May 8th
2014 Fall Feeder Sale Dates: September 4th, October 2nd, November 6th, December 4th

Consigner Name: _____
Contact Person:_____ Phone:_____

Cattle Description: □ Feeder Cattle □ Breeding Stock
Number of Head: _____ _____

Viral Vaccination for IBR, BVD Type I and II, BRSV

Brand Name:_____ Date Given: _____ □ Given Pre-Weaning
Serial#:_____ Booster Date: _____

Clostridial 7-Way Vacciation

Brand Name:_____ Date Given: _____ □ Given Pre-Weaning
Serial#:_____ Booster Date: _____

Other Vaccination Given/Other Herd Health Notes: (please list date administered)
_____
_____
_____

Pasturella Vacc: Brand: _____ Date:_____

Hemophilus Somnus Vacc: Brand: _____ Date:_____

DeWoromed/DeLoused: Brand: _____ Date:_____

Castration: Banded □ Knife Cut □ Clamped □ Given Tetanus: Yes ____ *or* No_____

Dehorned □ or Polled □

Calf Weaning Date: _____ or Yearlings □

Implanted □ *with* _____ Date:_____

NUTRITION PROGRAM:

Hay □ Haylage □ CornSilage □ Ground Corn □ Shell Corn & Pellet Prgm □
Pasture □ Minerals □ Trace Minerals □ _____% Protein Tub □

I certify that the above information is accurate:

□Vet Certificate Provided
□Vaccine sold by Vet Office
□Vet administered Vaccine

_____ _____
Consignor Signature *Date*