

Klamath County 4-H Goat and Sheep Bill of Sale

*All Out-of-State goats or sheep must include a photocopy of Health Certificate.
You need to bring a photocopy of this form to weigh-in.*

Breeder's Name: _____

Breeder's Mailing Address: _____

Breeder's Phone number: _____

Breeder's Physical Location: _____

Premise ID #: _____ **Scrapie Tag #:** _____

Description of Goat or Sheep: _____

Vaccination Record: _____

Date of Birth: _____ **Sex:** _____

Date of Castration: _____ **Date of Sale:** _____

Purchaser: _____

Purchaser's Address: _____

Breeder's Signature: _____

Initial Pre-Fair Weight: _____ **Fair Ear tag #:** _____