

OUTFRONT CATTLE SERVICE

Dennis Adams

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SALE:

(Please duplicate this form if you need additional copies)

RANCH NAME: _____ OWNER: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE #'S: Home: _____ Office: _____ Other: _____

Animal's Name: _____ Herd#: _____ AICA #: _____

Birthdate: _____ Polled: _____ Polled/Scurs: _____ Dehorned: _____ Horned: _____

Please Circle applicable items:

Sex of Animal	Fe	M
Calfhood Vaccinated	Yes	No
Halter Broke	Yes	No
Picture included	Yes	No
Registration Papers	Yes	No
Entry fee included	Yes	No

\$/lot
Amount: \$ _____

Ck# _____

ENTRY DEADLINE:

Outfront Cattle Service will
obtain current E.P.D.s from
AICA.

Calf Information: (If applicable)

Calf's Name: _____ Herd #: _____

Birthdate: _____ AICA #: _____

Sex of Calf: Fe _____ Male _____ Birth Weight: _____

Polled: _____ Polled/Scurred: _____ Dehorned: _____

Sire: _____ AICA #: M _____

Sire Owner: _____ Signing Fee: \$ _____

Address: _____

Calfhood Vaccinated:	Yes	No	Halter Broke:	Yes	No
Registration Papers:	Yes	No	Application Papers:	Yes	No

Breeding Information:

A-I Dates: _____ Sire: _____ AICA #: M _____

2nd A-I Date: _____ Sire: _____ AICA #: M _____

Pasture Dates:

From _____ to _____ Sire: _____ AICA#: M _____

From _____ to _____ Sire: _____ AICA#: M _____

COMMENTS:

Please use additional paper for Footnotes if needed.

Also include all Performance information, including lifetime weaning ratios on Cows, if you have this information.

PLEASE SEND COPY OF REGISTRATION PAPERS!