

REPORT OF ABNORMAL PHYSICAL TRAITS

This form is for recording a calf with abnormal physical traits. Complete the following to record the breeder and calf information. Record additional information about the calf in the notes section. Sign & date the completed form.



Breeder Information

Name: _____ Member Code: _____

Farm or Ranch Name: _____

Address: _____ City: _____ St: _____ Zip: _____

Phone: _____ Email: _____

Animal Information

Tag: _____ Sex: _____ Date of Birth: _____ Is calf a twin? _____ Is calf still living? _____

Calf's Sire: _____ Sire's reg #: _____

Calf's Dam: _____ Dam's reg #: _____

Was birth normal? _____ If not, describe: _____

Has this dam had other abnormal calves? _____

If dead, record, date of death: _____ Cause of death determined? _____

If so, describe cause: _____

Attending Vet: _____ Phone #: _____

Address: _____ Email: _____

Are pictures or video clips available? _____ (If yes, please include in this report.)

Has DNA been collected on the affected calf and notable relatives? _____

Notes

Report taken by: _____ Date: _____