

## 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.)

### Notes

Report taken by: \_\_\_\_\_ Date: \_\_\_\_\_