

Consigner Form
Southwest Missouri Performance Tested Bull Sale
Deadline January 30th, 2020

Consigner Farm Name: _____

Consigner Name: _____

Consigner Address: _____

Consigner Phone Number: _____

Consigner Email: _____

Consigner Farm Website: _____

Breed: _____

Bull Registration Number: _____

Bull Name: _____

Bull Birthdate: _____ **Bull Tattoo:** _____

Bull Sire Name: _____

Bull Maternal Grandsire Name: _____

Bull Birth WT: _____ **Bull Adj. Wean. WT:** _____ **Bull Adj. YR WT:** _____

Bull Post Weaning Average Daily Gain: _____ **Bull Yearling Frame:** _____

Only leave blank if Adj. Yr. Weight is reported

Bull Actual Wean. WT: _____ **Date Weighed:** _____

Bull Actual YR. WT: _____ **Date Weighed:** _____