

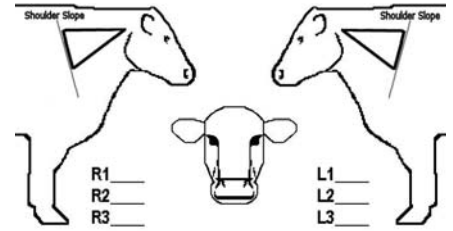
Cow/Calf Herd Health Procedures Record

Owner _____ WI BQA ID _____

Veterinarian _____

Date _____

Processors Signature _____



No.	Animal Tag ID	Sex	Procedures	Products						Comments
				1	2	3	4	5	6	
1										
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No.	Product	Contents	Route	Serial #	Expiration	Withdrawal
1						
2						
3						
4						
5						
6						