



**Record of Health and Vaccination Form
2024-25 NYRAA Cattle Development Program**



Owner Name: _____

Cell Number: _____

Consignor Farm Tag ID	Sex	Tattoo	840 Tag ID	Erwindale ID	Sale Lot #
		R: L:			
		R: L:			
		R: L:			
		R: L:			

Record of Health and Vaccination

Date of Admin	Product/Vaccine administered	Mode of administration