MISSING LIVESTOCK REPORT
LOST, STRAY OR STOLEN

OWNER OF LIVESTOCK_____________________________
ADDRESS________________________________________________________________________________
CITY/COUNTY/STATE________________________________________________________________________
PHONE______________________________________________________
COUNTY S.O. PHONE___________________________________________

LIVESTOCK INFORMATION

LAST LOCATION OF LIVESTOCK______________________________________NO.
MISSING__________________ SPECIES OF LIVESTOCK__________________ BREED
______________________ SEX ____________________ AGE _____________________COLOR ___________________ DATE &
TIME LIVESTOCK WERE LAST SEEN________________________________________________ADDITIONAL
DESCRIPTION OF LIVESTOCK_________________________________________________________________

EARMARKS

BRANDS

DRAW IN ALL IDENTIFYING MARKS AND BRANDS IN THE PROPER LOCATION

ANY INFORMATION CONCERNING THE LOCATION OF THE ABOVE DESCRIBED LIVESTOCK SHOULD BE REPORTED IMMEDIATELY TO THIS DEPARTMENT OR THE COUNTY SHERIFF’S OFFICE.