ON FARM RECORD FORM
MEAT GOAT PERFORMANCE TESTING

Sire No._____ Name_____

Sire Breed Code_____ Address_____

Date Buck was turned in_____ County_____

No. does exposed to buck_____ Record year_____ Herd No._____
(to be assigned at LEC)

Year_____

BREEDER COMPLETE TO HERE ---------->															
Doe No.	Doe Age Yrs.	Doe Breed	Kid No.	Birth Date Mo. Day	Kids born 0=0 S=1 TW=2 TR=3 Q=4	SEX --- BDW		Weigh Day Mo. Day	Act. Wt.	Wt. per day of Age	50 Day Wt.	Adj. Factor	Adj. 50 Day Wt.	Adj. 50 Day Wt. Rat.

Information from this form can help in selecting which buck or bucks may have better results on test. The form also allows the LEC to qualify a lower gaining buck based upon growth information from his contemporary sire group. If a buck has sufficient growth or does not have a contemporary group this form is helpful but unnecessary.

MAIL TO: PA Dept. of Agriculture
Livestock Evaluation Center
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Pennsylvania Furnace, PA 16865