KENTUCKY UNIFORM IDENTIFICATION PROGRAM (K.U.I.P.) TAG REPLACEMENT FORM

Exhibitor Name: _____ Birth Date: _____

Address: _____ City: _____ Zip: _____

County: _____ Please Circle One: 4-H FFA Novice

Date of K.U.I.P. Tag Replacement: _____

Market Species *(Steer, Heifer, Lamb, Hog, Goat)*	Original R.F.I.D. Tag Number	Replacement R.F.I.D. Tag Number	Physical Description (color, breed, etc.) (Include ear notches for hogs, if present)	Sex (M or F)

In completing this replacement tag form, we verify that the original R.F.I.D. tags for the animals listed above were retagged with the replacement R.F.I.D. tags shown above.

_____ _____

Exhibitor *Date* *Parent or Legal Guardian* *Date*

_____ _____

Supervising Agent or Advisor *Date* *Division of Animal Health Representative* *Date*

The exhibitor's supervising County Agent or Vocational Agriculture Teacher is responsible for mailing the completed, original form to address shown below (a copy should be kept for the supervising Agent's or Teacher's records, and for the exhibitor's records).

Division Director
Kentucky Department of Agriculture
Division of Show & Fair Promotion
100 Fair Oaks Lane, 5th Floor
Frankfort, KY 40601

Attachment D