BULL CALVES

HEREFORD MARKET AUCTIONEERS LTD

ENTRY FORM **DATE .....**

CATALOGUE ENTRIES CLOSE 12 NOON WEDNESDAY WEEK BEFORE SALE

FOR OFFICE USE	**NO. IN LOT**	**BREED**	**SEX**	**AGE** (months)	**DETAILS** (Name/tag)
			BU		
			BU		
			BU		
			BU		
			BU		
			BU		
			BU		
			BU		
			BU		
			BU		
			BU		
			BU		

FABBL/FAWL/VAN: NUMBER:.....exp..... DATE LAST TB TEST (injection date).....

NAME..... ACCOUNT CODE.....

ADDRESS..... CPH.....

POSTCODE..... TELEPHONE NO.....

EMAIL ADDRESS: .....

RECEIVED ON..... RECEIVED BY.....

HEREFORD MARKET AUCTIONEERS, THE LIVESTOCK CENTRE, ROMAN RD, HEREFORD HR4 7AN TEL: 01432 761882