



Pair Consignment Form

Consigner Name: _____ Sale Date: _____

Address: _____ Sale Location: PSI TCS

Pair Headcount: _____

Color: _____

Cow Information:

Age of Cows: _____

Exposed to/Sire: _____

Vaccinations: _____

Calf Information:

Birth Dates: _____

Vaccinations: _____

Other Info: _____

Signature of Consignor: _____