

Date: \_\_\_\_\_

Report #: \_\_\_\_\_

(ILIA USE ONLY)

# I.L.I.A. STOLEN LIVESTOCK REPORT

International Livestock Identification Association

4701 Marion Street, Suite 201, Denver, Colorado 80215-2139

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AUTHORIZED AGENCY SUBMITTING REPORT: \_\_\_\_\_

AUTHORIZED AGENT'S SIGNATURE: \_\_\_\_\_

ADDRESS, CITY, ST & ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

LOCATION OF THEFT (CITY, COUNTY, STATE): \_\_\_\_\_

SPECIES OF LIVESTOCK: \_\_\_\_\_ NUMBER STOLEN: \_\_\_\_\_

BREED: \_\_\_\_\_ SEX: \_\_\_\_\_ AGE: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

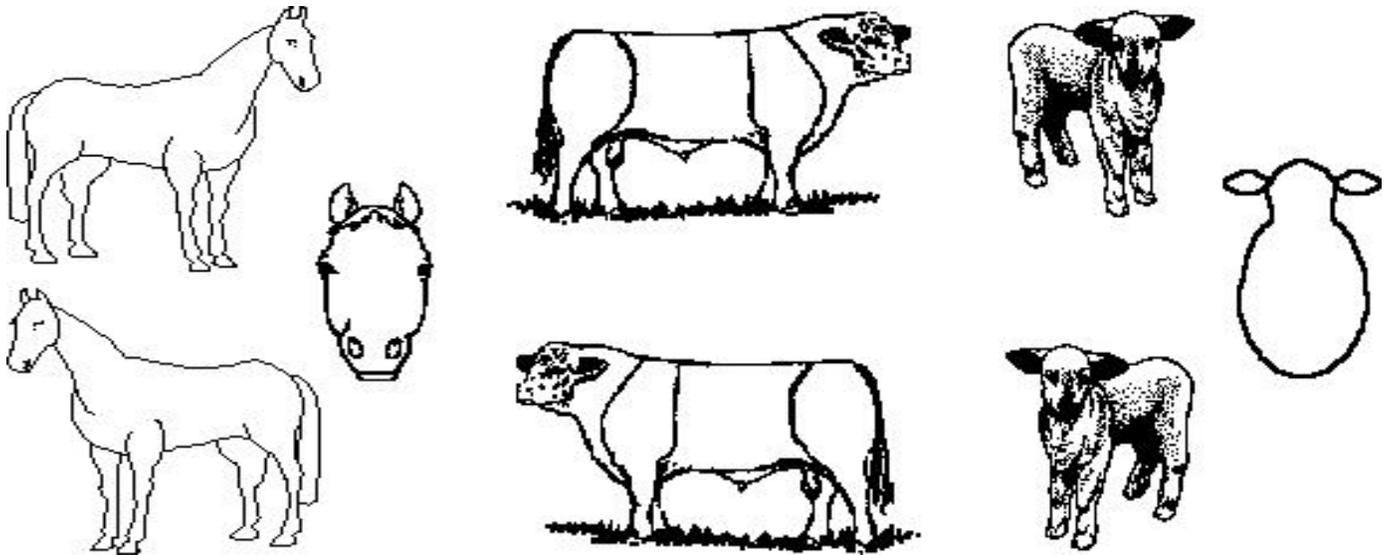
DATE AND TIME LIVESTOCK WERE LAST SEEN AND ADDITIONAL DESCRIPTION OF LIVESTOCK:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(INCLUDE ALL BRANDS, MARKS, TATTOOS, SCARS, EARTAGS, EARMARKS, ETC)

LOCATIONS:


EARMARKS:



DRAW IN ALL IDENTIFYING MARKS AND BRANDS IN THE PROPER LOCATION

OTHER THEFT INFORMATION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

YES \_\_\_\_\_ NO \_\_\_\_\_ ADDITIONAL SUSPECT INFORMATION ON FILE--CONTACT REPORTING AGENCY