

# Canandaigua Stockyards Vaccination Form

**Contact Name:**

**Address:**

**Phone Number:**

**Weaning Date:**

**Bunk Trained: Yes or No**

**Approx. Days on Feed:**

**Feed Type:**

**Castrated: Yes or No**

**If yes write method of castration and Surgical date:**

**Vaccinated for pneumonia: Yes or No**

**If yes write brand & serial #:**

**Date given:**

**Booster Date:**

**Vaccinated for Clostridial spp.? Yes or No**

**If yes Brand & Serial #:**

**Date given:**

**Booster Date:**

**Other Vaccines/Dewormer given:**

**Date:**

**Other supplements given:**

**Date:**

**Have these cattle ever received antibiotics or ionophores (booatec, rumensin, monensin): Yes or No**

**If yes write Brand and Date:**

**Sale Tag #'s**

**Leave this filled out form with your cattle**

Prepared by TP Cattle Services  
Phone: (585)-465-2218

Canandaigua Stockyards  
Phone: (585)394-1515

