

EATON COUNTY JR. LIVESTOCK ASSOCIATION
PROXY CARD FOR MARKET LIVESTOCK SALE

You may use this card if the buyer you contacted cannot attend the sale, but would like to buy your animal. Please note that this is a live auction and completion of this card may not guarantee the animal if there is a higher bid price.

PURCHASE AUTHORIZATION

I wish to support the Eaton County Market Livestock Sale by purchasing: _____
(Specify member's name and animal)

I will pay \$_____/ lb. Over the market price and/or not to exceed total amount of \$_____.

I want the animal resold: ____YES ____NO OR

I want the animal processed at: _____

Person to Call for cutting instructions: _____

Phone: _____

Check One Line Below

_____ I hereby authorize you to designate someone to purchase an animal for me, per the information above.

_____ I will contact my own proxy buyer.

Signed*: _____ Date*: _____

Name for Advertising: _____

Contact Name*: _____

Address*: _____

Phone* (_____) _____

**Required*

(Bill will be sent to above address and will be due net 10 days from the day of the sale).

Name of Jr. Livestock Representative

EATON COUNTY JR. LIVESTOCK ASSOCIATION
PROXY CARD FOR MARKET LIVESTOCK SALE

You may use this card if the buyer you contacted cannot attend the sale, but would like to buy your animal. Please note that this is a live auction and completion of this card may not guarantee the animal if there is a higher bid price.

PURCHASE AUTHORIZATION

I wish to support the Eaton County Market Livestock Sale by purchasing: _____
(Specify member's name and animal)

I will pay \$_____/ lb. Over the market price and/or not to exceed total amount of \$_____.

I want the animal resold: ____YES ____NO OR

I want the animal processed at: _____

Person to Call for cutting instructions: _____

Phone: _____

Check One Line Below

_____ I hereby authorize you to designate someone to purchase an animal for me, per the information above.

_____ I will contact my own proxy buyer.

Signed*: _____ Date*: _____

Name for Advertising: _____

Contact Name*: _____

Address*: _____

Phone* (_____) _____

**Required*

(Bill will be sent to above address and will be due net 10 days from the day of the sale).

Name of Jr. Livestock Representative