Livestock Inventory Summary

Electronic versions available at agrorganic@mt.gov

Date:

Producer Name(s): _____ License Number(Office Use Only:_____

Business Name: _____ Farm Location (County/State):_____

Livestock (Species)	**Life Stage** (Calf, Yearling, Breeder, etc.)	**Sex** (M/F)	**Number of Animals** (Count Non-Organic)