

The Butchers Breed

Grass Fed Devon Steak Competition

Official Submission Form

Purpose of Information Collection

Information collected on this form will be used to educate judges and members and to provide context to the audience during the award ceremony. With your permission, select information may also be shared with the membership in future publications. Permission to print or share information in any publication will be requested prior to use.

Entry Number (Office Use Only): _____

Exhibitor / Farm Information

Farm / Ranch: _____

Contact Name: _____

Phone: _____ **Email:** _____

Mailing Address: _____

Animal Information

1. Age at slaughter (months): _____

2. Breed Type: Registered Purebred Devon Crossbred Devon

If crossbred, list breed(s): _____

3. Sex: Steer Heifer

4. Month & Year Slaughtered: _____

Feeding & Forage Information

5. Forages consumed in the last 90 days (check all that apply):

- annual forages Fescue Orchardgrass Bluegrass Ryegrass
 Native grasses Clover Alfalfa Other legumes
 Sorghum hay stored forage

Other forages: _____

Finishing & Grazing Management

6. State where animal was finished: _____

7. Grazing management (check one):

- Daily (multiple moves/day)
 New paddock once per week
 New paddock once every 2 weeks
 Greater than 2 weeks between moves

8. Do you clip or mow pastures? Yes No

If yes, frequency:

- After every grazing Monthly Several times/season Once/year
 Other: _____
-

Certifications & Experience

9. Certifications (check all that apply):

- AGW / Animal Welfare Approved Certified Grassfed Organic
 Non-GMO Other: _____ None

10. Years grazing animals: _____ years _____ months

11. Years finishing grass-finished beef: _____ years _____ months

Permission for Future Publication (Optional – Check One)

- I grant permission** for selected information from this submission to be used in future publications or educational materials, with prior approval requested before use.
- I do not grant permission** for use beyond judging and award-ceremony education.
-

Producer Verification

I certify this information is accurate and truthful.

Signature: _____

Printed Name: _____

Date: _____

Please ship submissions in a small styrofoam cooler, with sufficient ice packs to help keep submission frozen.

Submissions should be shipped overnight or via 2 day shipping to:

O'Neils Quality Foods

10929 Route 322

Shippenville Pa 16254.

Office Use Only

Steak Received: Yes No

Condition Upon Receipt: _____

Notes: _____