

**Big Sky County State Fair
4-H/FFA Market Livestock Sale**

Proxy Buyer Agreement

Buyer's Printed Name: _____
Address: _____
City, State, Zip: _____
Phone: _____

I authorize the individual listed below to purchase market animal(s) for me or for my company at the 2018 4-H/FFA Market Livestock Sale at the Big Sky County State Fair. The Upper Limit I am willing to spend at this sale is: \$_____. (This Agreement is **Not Valid** if no Upper Limit is given)

I prefer to purchase: (Indicate animal number below) **Member Name:** _____

- () Sheep # _____ Up to \$ _____ or \$/lb _____
- () Hog # _____ Up to \$ _____ or \$/lb _____
- () Beef # _____ Up to \$ _____ or \$/lb _____
- () Goat # _____ Up to \$ _____ or \$/per head _____
- () Pen of 3 Rabbits _____ Up to \$ _____ or \$/pen _____
- () Pen of 3 Poultry _____ Up to \$ _____ or \$/pen _____
- () Preferred Species _____ Up to \$ _____ or \$/lb _____

Animals are to be: (check one)

() Resold and I pay the difference (between purchase price and market value announced at the sale)
***NOT available for Poultry or Rabbit purchases

() Retained and I pay the full bid price plus cost of cutting and wrapping. **(Buyer is responsible for communicating with Processor on how meat should be processed.)**

() If my upper limit has been passed and I have not gotten a final bid, I would like to apply an "Add-on Donation" to the above specified member in the amount of _____ *OR see separate Add-On Form*

If you decide to keep one animal and sell another, please specify which animal you intend to keep and provide your proxy with specific instructions on each animal.

My proxy will be: _____ **(Printed Name)** If none named, an appropriate Market Livestock Committee Member will assign your proxy bidder.

I, _____ (proxy buyer) understand that I am responsible for payment on any animal(s) I purchase in the name of the below buyer if said buyer does not sign this form or if I exceed the upper limit specified above by the buyer or if no upper limit is specified.

Proxy Signature: _____ Date: _____

Buyers Signature: _____ Date: _____

**(Buyer MUST sign form. Proxy is responsible for payment if form is not signed by buyer)
Gallatin Co. 4-H Office #: 406.582.3280**

GALLATIN COUNTY 4-H/FFA MARKET SALE

BUYER'S DONATION

ADD-ON BEFORE or AFTER the AUCTION

Buyer _____ Buyer Bid # _____

Contact _____

Address _____

Phone # _____

Check Payable: **Gallatin County 4-H/FFA Market Sale**

Mail To: Gallatin County Extension
903 N. Black Ave.
Bozeman, MT. 59715

1 Donate To: Exhibitors Name _____
Sale Order # _____
Amount \$ _____

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2 Donate To: Exhibitors Name _____
Sale Order # _____
Amount \$ _____

.....

3 Donate To: Exhibitors Name _____
Sale Order # _____
Amount \$ _____

.....

Signature _____ Date _____

Deadline: All add-on's due by Friday July 27, 2018