



## Emergency Contacts Sheet

<b>Farm Owner / Manager Contact</b>	
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Primary Veterinarian		Alternative Veterinarian
Name		
Contact		

Lambing Team Members			
Name		Contact	
Name		Contact	
Name		Contact	

<b>Feed Supplier Contact</b>	
<b>Equipment Repair Contact</b>	
<b>Electrician Contact</b>	
<b>Poison Control</b>	
<b>Pharmacy</b>	

<b>Local Emergency Services</b>	
<b>Fire</b>	
<b>Police</b>	
<b>Ambulance</b>	