

These cards are to be completed, signed by the judge, separated and returned to APHA

Original to be mailed to APHA

Photocopy of this card must be retained by show management

APHA Judge Show Number: _____

Date & Location of Show: _____

APHA Class Name / Class Code: _____

APHA Class Number: _____

Placing: (contestant number)

- 1. _____ 5. _____
- 2. _____ 6. _____
- 3. _____ 7. _____
- 4. _____

Once the judge has marked this card, there shall be no changing of placings.

If clerical corrections are made, they must be initialed by the judge. The judge must list all contestant numbers through seven entries, including disqualifications. **List all DQ's.** **Check box if comments on reverse side.**

Judge's Name: _____

Judge's Signature: _____

Number in Class: _____



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