

Landowner or Club Hillside

Co-op# MS-5622

Season 2011-2012

Pg. 1 of 5

For Office Use Only	DEER NUMBER	HARVEST DATE		SEX	WEIGHT		MILK PRESENT ?	ANTLER MEASUREMENTS						HOOF SLOUGHING	COMMENTS			
		Month	Day		Live	Dressed		# Points	Circumference		Length		Inside Spread					
3	1	12	02	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	110		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
3	2			<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	120		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
3	3	12	10	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	80	65	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
5	4	12	12	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	105	70	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
5	5	12	10	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
3	6	12	02	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	125	90	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
3	7	12	2	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	180		<input type="checkbox"/> Yes <input type="checkbox"/> No											
4	8	12	3	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		65	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
4	9	12	2	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	165	144	<input type="checkbox"/> Yes <input type="checkbox"/> No	8	3 3/4	3 3/4	15 1/4	14 3/4	12 1/4					
3	10	12	12	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	161	126	<input type="checkbox"/> Yes <input type="checkbox"/> No	7	3 1/4	3 1/4	18	17	14					no jaw - Sam Jordan
3	11	12	2	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe			<input type="checkbox"/> Yes <input type="checkbox"/> No	7										
4	12	12	15	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		70	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
3	13	12	7	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		90	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
3	14	12	10	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	60		<input type="checkbox"/> Yes <input type="checkbox"/> No											
3	15	12	3	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		90	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
4	16			<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	85		<input type="checkbox"/> Yes <input type="checkbox"/> No											
4	17			<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	100	82	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No											
4	18	12	10	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	150		<input type="checkbox"/> Yes <input type="checkbox"/> No	8	4	3 3/4	15 1/2	15 1/2	12					no jaw
4	19	12	9	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	170	140	<input type="checkbox"/> Yes <input type="checkbox"/> No	6	3 3/4	3 1/2	15	14	13					no jaw
4	20	12	6	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		170	<input type="checkbox"/> Yes <input type="checkbox"/> No	7	4	4 3/4	20	22	16					no jaw

Landowner or Club Hillside

Co-op#

Season 2011-2012

Pg. 2 of 5

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		Month	Day		Live	Dressed		# Points	Circumference		Length				Inside Spread
								Left	Right	Left	Right				
2	21	11	21	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	125	11	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	1							
2	22	12	10	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	145	11	<input type="checkbox"/> Yes <input type="checkbox"/> No	4	3 3/4	18	20	17			Legs from best Measurement
2	23	12	11	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	145	18	<input type="checkbox"/> Yes <input type="checkbox"/> No	3 3/8	3 1/4	16 1/2	16 3/8	12			
5	24	01		<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe			<input type="checkbox"/> Yes <input type="checkbox"/> No								no weight, day shot, or milk
4	25	12	10	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	149	18	<input type="checkbox"/> Yes <input type="checkbox"/> No			21 1/2	21 1/2	15 1/2			
4	26			<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	140	17	<input type="checkbox"/> Yes <input type="checkbox"/> No	4	3 3/4	19 1/2	20	16			grown Chambers
4	27	12	03	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	200	9	<input type="checkbox"/> Yes <input type="checkbox"/> No	5	5	20	20	16 3/4			no date
2	28	12	11	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	130		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No								
2	29	12	12	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	155	7	<input type="checkbox"/> Yes <input type="checkbox"/> No	3 3/4	3 3/4	15 1/4	15 1/4	12.75			
2	30	12	06	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	110	16	<input type="checkbox"/> Yes <input type="checkbox"/> No	3	3	15	15	13			no date
4	31			<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	190	17	<input type="checkbox"/> Yes <input type="checkbox"/> No	4 3/4	4 3/4	19 1/4	19	14 1/2			
4	32	12	24	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	99	9	<input type="checkbox"/> Yes <input type="checkbox"/> No	3 1/4	3 3/8	13	13 1/4	11 3/8			additional 3/4 in on sticker
3	33	12	09	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	205	10	<input type="checkbox"/> Yes <input type="checkbox"/> No	4 5/8	4 5/8	23	22 1/2	16 3/4			
3	34	12	10	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	135	7	<input type="checkbox"/> Yes <input type="checkbox"/> No	4	4	17	17 1/2	14 1/2			
3	35	12	02	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	150	8	<input type="checkbox"/> Yes <input type="checkbox"/> No	4 1/2	4 1/2	18 1/2	18 1/2	16			
3	36	12	02	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	185	9	<input type="checkbox"/> Yes <input type="checkbox"/> No	3 1/2	3 1/2	16 1/2	17	13			
4	37	12	02	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	80		<input type="checkbox"/> Yes <input type="checkbox"/> No								Graft
4	38	12	10	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	145	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	4	4	6	19	12 1/4			left side broke off
3	39			<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	155	9	<input type="checkbox"/> Yes <input type="checkbox"/> No	4 1/2	4 1/4	19 1/2	20 1/4	16 1/4			no date
3	40	12	02	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	140	8	<input type="checkbox"/> Yes <input type="checkbox"/> No	4	4	20 1/2	20 1/2	16			

Landowner or Club

Hillside

Co-op#

Season 2011-2012

Pg. 3 of 5

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		Month	Day		Live	Dressed		# Points	Circumference		Length		Inside Spread			
1	41	12	9	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	126	90	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
2	42	12	7	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	150	150	<input type="checkbox"/> Yes <input type="checkbox"/> No	8	3 ^{3/4}	3	15	15	16			
5	43	12	1	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	130		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
1	44	12	4	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	100		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
2	45	12	2	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	80	60	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
2	46	12	2	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	145	110	<input type="checkbox"/> Yes <input type="checkbox"/> No	9	3 ^{3/4}	3 ^{1/4}	15 ^{3/4}	16 ^{1/4}	8 ^{3/8}			
2	47	12	2	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe		135	<input type="checkbox"/> Yes <input type="checkbox"/> No	6	3 ^{1/2}	3 ^{1/2}	16 ^{3/4}	17	14 ^{3/4}			
2	48	12	8	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		120	<input type="checkbox"/> Yes <input type="checkbox"/> No	8	3 ^{1/4}	3 ^{1/4}	16 ^{1/8}	16	9			
4	49	12	5	<input type="checkbox"/> Buck <input type="checkbox"/> Doe	140		<input type="checkbox"/> Yes <input type="checkbox"/> No	2								
4	50	12	3	<input type="checkbox"/> Buck <input type="checkbox"/> Doe		176	<input type="checkbox"/> Yes <input type="checkbox"/> No	8	4 ^{3/4}	4 ^{3/8}	25 ^{1/4}	25 ^{1/4}	26 ^{1/2}			Hunter-Deer-
2	51	12	3	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	100		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
2	52			<input type="checkbox"/> Buck <input type="checkbox"/> Doe		135	<input type="checkbox"/> Yes <input type="checkbox"/> No	9	4	4	15 ²	15 ^{1/2}	12			
2	53	12	2	<input type="checkbox"/> Buck <input type="checkbox"/> Doe	235		<input type="checkbox"/> Yes <input type="checkbox"/> No	10	5	5	19	20	16 ^{3/4}			
3	54	11	4	<input type="checkbox"/> Buck <input type="checkbox"/> Doe		120	<input type="checkbox"/> Yes <input type="checkbox"/> No	7	3 ^{1/4}	3 ^{1/4}	17 ^{3/4}	17	14 ^{3/4}			
2	55			<input type="checkbox"/> Buck <input type="checkbox"/> Doe		148	<input type="checkbox"/> Yes <input type="checkbox"/> No	8	4	4	17 ^{1/2}	19 ^{3/4}				
5	56			<input type="checkbox"/> Buck <input type="checkbox"/> Doe	180		<input type="checkbox"/> Yes <input type="checkbox"/> No	11	4 ^{3/4}	4 ^{3/4}	20	21	13 ^{1/2}			
2	57			<input type="checkbox"/> Buck <input type="checkbox"/> Doe	150		<input type="checkbox"/> Yes <input type="checkbox"/> No	8	4	4	15	14 ^{1/2}	13 ^{1/2}			
1	58	12	2	<input type="checkbox"/> Buck <input type="checkbox"/> Doe		140	<input type="checkbox"/> Yes <input type="checkbox"/> No	7	6 ^{1/2}	6 ^{3/4}	18	17 ^{3/4}	14 ^{1/2}			
1	59	12	10	<input type="checkbox"/> Buck <input type="checkbox"/> Doe	180	130	<input type="checkbox"/> Yes <input type="checkbox"/> No									Grey Buckle - Mustang
1	60	12	3	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	51		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									

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		Month	Day		Live	Dressed		# Points	Circumference		Length		Inside Spread			
								Left	Right	Left	Right					
	601			<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		140	<input type="checkbox"/> Yes <input type="checkbox"/> No	18	4	4	15	15	14			
3	602	12	02	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									<i>Heavy balance</i>
4	603	12	10	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	110		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									<i>No weight</i>
4	604	12	9	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		175	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9	4 1/2	4 3/4	21 1/4	20 1/4	17			
3	605	12	10	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	75	60	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
3	606	12	03	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	160		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6	4	4	21	9				<i>only 2 pts on right (broke off)</i>
3	607	12	11	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	120		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8	2 1/2	2 1/2	14	14	12			
3	608	12	08	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	122		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						16			<i>no tape measure available</i>
4	609	12	08	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe		126	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8								
4	70	12	02	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		100	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
4	71	12	04	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	140		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
3	72	11	03	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		75	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
4	73	12	02	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	105		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
4	74	11	63	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	125		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
2	75	12	03	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe		78	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
2	76			<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		168	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	8	4	4	17	17	12			<i>no date</i>
2	77	12	02	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe		130	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6	4 1/4	4	15	16 1/4	15 3/4			
2	78			<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	180		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7	3 1/2	3 1/2	14 1/2	15				<i>no name or date</i>
3	79	10	15	<input type="checkbox"/> Buck <input checked="" type="checkbox"/> Doe	100	70	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
2	80	12	07	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		130	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	10	4	3 3/4	18	18	12			

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Season 2011-2012

Pg. 5 of 5

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		Month	Day		Live	Dressed			Circumference		Length		Inside Spread		
3	81	12	02	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	141	131	<input type="checkbox"/> Yes <input type="checkbox"/> No	10	4	4 1/4	16 1/2	17 3/4	13 3/4		
4	82	12	29	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	11	131	<input type="checkbox"/> Yes <input type="checkbox"/> No	5	3 3/4		10 1/2		13 1/2		
3	83	12	02	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	125	140	<input type="checkbox"/> Yes <input type="checkbox"/> No						14		
2	84	12	02	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	140		<input type="checkbox"/> Yes <input type="checkbox"/> No	8	4	4	16	16	14		
1	85	11	04	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	110		<input type="checkbox"/> Yes <input type="checkbox"/> No								
1	86	11	04	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	100	70	<input type="checkbox"/> Yes <input type="checkbox"/> No								
1	87	10	29	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	80		<input type="checkbox"/> Yes <input type="checkbox"/> No								
4	88	10	27	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		80	<input type="checkbox"/> Yes <input type="checkbox"/> No								
	89			<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe	115		<input type="checkbox"/> Yes <input type="checkbox"/> No								no date
	90	12	03	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		145	<input type="checkbox"/> Yes <input type="checkbox"/> No	8	3 1/2	3 1/2	18	18	14 1/2		Mounting - Total Muzzers
	91	12	03	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		180	<input type="checkbox"/> Yes <input type="checkbox"/> No	9	4 1/2	4 3/8	21	22	18		Saw Speckles - Muzzers
	92	12	07	<input checked="" type="checkbox"/> Buck <input type="checkbox"/> Doe		180	<input type="checkbox"/> Yes <input type="checkbox"/> No	10	4 1/2	4 1/2	19	19	16		Saw Speckles - Muzzers