



San Miguel County Assessor

Connie M. Gallegos, County Assessor

Dorene Garcia-Lujan
Chief Deputy

Jessica Garcia
First Deputy

Annual Livestock Owner's Report

All livestock located in San Miguel County on January 1 of the tax year shall be valued for property taxation purposes as of January 1st. Please complete and return this form to the San Miguel County Assessor's Office by the last day of February (7-36-21 NMSA).

Tax Year: _____ School District: _____ Owner Number: _____ Map Code: 1- _____ - _____ - _____
 Owner Name: _____ Address: _____
 City: _____ State: _____ Zip Code: _____ Phone: (_____) _____

Has livestock been sold? Yes () No () If yes, please provide the Assessor's Office a copy of Bill of Sale.

Type	Number of Livestock		Length of Time in County	Type	Number of Livestock		Length of Time in County
	Com.	Regtd.			Com.	Regtd.	
"C" CATTLE				"G" GOATS			
Bulls				Angora-Bucks			
Cows				Angora-Other			
Heifers ()				Common-Bucks			
Heifer Calves				Common-Other			
Steer Calves				Milk Goats			
Steer Yearlings & Over				Goats-Other			
"D" DAIRY CATTLE				"H" HORSES			
Bulls				Horses			
Cows				Llamas			
Heifers				"P" SWINE			
Calves				Boars			
Calf-Operation 0-340 Lbs				Breeding Sows			
"S" SHEEP				Hogs over 1 yr.			
Rams				Hogs under 1 yr.			
Ewes over 2 yrs.				"B" BISON			
Ewes 1 to 2 yrs.				Cows 3+			
Sheep under 1 yr.				Heifers 12-35 months			
Wethers				Bull Calves			
"R" RATITES (Ostriches or Emus)				Bull			
Breeding Females							
Breeding Males							
Slaughter Animals							

Do you own the above listed livestock being grazed on your land? Yes () No ()

If "No" please indicate below owner and provide name and address (es) of private land owner(s).

BLM () State Leased Land () USFS () Private ()

Private Owner Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____ Phone: (_____) _____

I hereby swear or affirm that the information provided is true and correct to the best of my knowledge and belief.

Signature of Owner (or Agent) of Livestock _____ Date _____

Approved: Yes () No () Received by: _____ Date: _____ Verified by: _____ Date: _____ Entered by: _____ Date: _____

Comments: _____