In consideration of the above transfer, I agree to make all payments and abide by all conditions of this contract. It is acknowledged that the Michigan FQHR acts only as an agent.

Mare's Name	Reg. #		
Owner's/Lessee Name		Date	_
Sign:	Phone:		_
Address:			_
City:	State:	Zip	_
TRANSFER: Michigan FQHR hereby transfers this breedin	g to		_
and acknowledges receipt of \$	_as payment of the	nis service.	
Please submit this contract to:			
The FQHR-MI SSS Amy DeGeer Roten, Program Chairperson 3421 E. Greystone Place Midland, MI 48642 989.297.1267 fqhrmi.sss@gmail.com			
SSS Chairperson's Signature:			