

To be completed when a member leases a bull from another member.

The form should be completed and signed when the bull is returned to the owner to ensure that all females' matings are covered.

Leasee Details	
Name	Stud Name
Address	Tattoo
Bull Details	
Name of Bull	
Tattoo Date of Birth He	rd Book Number
LEASING DATES	
These are the date the bull left its residing propery and the date it	t returned.
From To	
Bull Owner Details	
Stud Name	Tattoo
Stud Name	Tattoo
Name	
Turic	
Signature	Date

O CCI YY		
Office Use	Invoice N <u>o</u>	
	Payment Type	
SECRETARY	Payment Date	
		Signature