

Stillwater Veterinary Clinic
2020 Curve Crest Boulevard W
Stillwater, MN 55082
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repro@stillwaterveterinaryclinic.com

RECORD OF SEMEN TRANSFER OF OWNERSHIP OR DESTRUCTION OF SEMEN

SEMEN IDENTIFICATION

Stud Owner's Name		
Registration Name		
Registration Number		
Breed		
Collection Date	Straw Identification	Number of Straws

SEMEN RELEASE

Signature
Date

As owner or agent of the owner of the above identified semen, I authorize representatives of the Stillwater Veterinary Clinic, LTD:

- to thaw (destroy) semen
- to transfer ownership of said semen to the person listed below

SEMEN OWNERSHIP TRANSFERRED TO

New Owner's Name
Address
Phone Number
Email Address

STORAGE FACILITY TRANSFER

Clinic Name
Address
Phone Number
Email Address