SEMEN REQUEST FORM

Stallion:	Owner/Agent:
Cooled/Shipped: Frozen:	
Date of Initial Contact:	
Date of Request for Shipment:	
To Receive Shipment on:	<u></u>
Ship to:	Bill to:
Name	Name
Attn:/Business Name	Attn:/Business Name
Street	Street
City, State, Zip Code	City, State, Zip Code
Phone Email Address	Phone Email Address
Payment Method	
Client File Information Completed:	
Credit Card # on file:	
Shipping Method	
Next Day: Provider: Federal Express	
Date Shipped:	Tracking #:
Same Day Air:	Closest Airport:
Date Shipped:	Airline:
Flight #:	ETD Dulles:
ETA Destination:	Baggage #: