State of Oregon

HORSE BILL OF SALE:

Seller / Consigner Information:						
Full Name:						
Shaunte' Robert	 		 			
Address: Milton-Freewater, OR 97862						
Telephone:		T	E-mail:			
509.386.8507			diamondsrperformancehorses@gmail.com			
	Buyer Informa	tio	n:			
Full Name:						
Address:						
Telephone:			E-mail:			
		4.				
	Horse Informa	itio	on:			
Name:	Date of Birth:	Cc	olor:	Sex: ☐ Mare ☐ Gelding ☐ Stallion		
Breed:	Size:	Re	egistration Number:	Brand:		
Description:						
Name of Sire:		Sire's Registration Number:				
Name of Dam:			Dam's Registration Number:			
		_				
. Shaunta' Pahart	(1) - ((0 - 1) - 1)			1		
, Shaunte' Robert				d convey all		
rights, title and interest in the above described horse (the "Horse") to						
(the "Buyer") for and in consideration of the total sum of						
\$, (Check one)						
Personal check (CK #:)						
☐ Cashier's check						
☐ Cash						

	Venmo – <mark>MUST BE FRIE</mark>	ENDS BEFORE SENDING	
	Wire Transfer (All bank	Fees apply)	
	Other:		
	•	by acknowledged. This sum represen between both the Seller and the Buy	
	Veter	rinarian Examination (Check o	one):
	The Buyer hereby wai	ves the right to take the above-d	escribed horse to a
ve	terinarian for a pre-pure	chase examination.	
	Veterinarian examinatio	n was performed on	, 20
	Coggins		
	Health Certificate		
	Brand Inspection		
	•	Warranty and Guarantees:	
he inf	rein contained are true ormation and belief.	eclares under penalties of perjur and correct to the best of his or cepts receipt of the Horse described	her knowledge,
an wa	d acknowledges that the rranties of any kind, eithe	Horse is sold in "AS IS" condition er express or implied, except for the	without any guarantees or
<u>s</u>	haunte' Robert Seller Full Name	Shaunte' Robert Seller Signature	Date
	Buyer Full Name	Buyer Signature	Date