[PLEASE READ CONTRACT & ADDENDUM CAREFULLY. SIGNED COPIES MUST BE ON FILE PRIOR TO BREEDING.]

TRES MY FAME AQHA 5564149

(Contact TSQH for Breeding Dates) **NO SHIPPED SEMEN.**

| Mare | Registration No | | | | | |
|--------------------------------------|--|--|---|---|--|--|
| MARE OWNER | | | | | | |
| Stallion Own | er Treasure State Qua | arter Horses (TSQH) | | | | |
| | | | es (TSQH), 30210 Clear Creek Road, Chinook will reserve for the Mare Owner a breeding to 1 | , , | -4400, fax (406) 395-5482 | |
| Paid with Che | eck# | Date | | | | |
| 2024 STUD FE | E \$2000 (less booking | g fee) | | | | |
| Paid with Che | eck# | Date | | | | |
| | | med to TSQH with a copy of man | e's registration papers, front and back, and entire sacting TSQH. | tud fee, prior to breeding | J . | |
| 2] Mares | s on premises of TSQH I | have a breeding priority on any | given breeding day. | | | |
| 3] The n | nare owner represents | the mare is healthy and in sour | d breeding condition and registered with the design | nated registration orgar | nization. | |
| alone, nu foaling th veterinar | urses, and lives for 24 h nat the mare did not pro ian giving the particular | ours. If foal is born dead or die duce a live foal and b) within te s required to substantiate the f | h return privilege for the year immediately followir s within 24 hours this guarantee only applies if the n days after the mare owner's notice, the mare ow silure of mare to produce a live foal. A replacement is frozen, then the live foal guarantee is void. | mare owner a) notifies wher provides the stallion | stallion owner within 24 hours after the time of nowner with a statement from a licensed | |
| must noti | ify TSQH within 48 hou fee) within sixty (60) da | rs of transfer of the embryo(s). | uced from the Stallion breeding under this agreem of embryo transfer results in multiple pregnancies, order to receive a certificate for the additional foal(soryo insurance. | Mare Owner must pay a | additional Stallion service fees (including | |
| _ | eder's certificate will be paid in full prior to issua | • | each live foal born as a result of breeding service | es herein provided. All fe | es and expenses pertaining to this breeding | |
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| lare Owner | Information | | | | | |
| the below signe | ed, have read this contra | act and agree to its contents. All | information is true and correct and the above name | ed mare shall be bred to | | |
| | | | | | _Cell | |
| | | | Work Phone | | _Fax | |
| | | | | | | |
| • | | Date | | | | |
| Mare information | | | | | | |
| Ory | Maiden | Bred to | Last bred | Age | Last Foaling Date | |

Insurance Company ______Policy _____Telephone _____