



# Australian/American White Sheep USA

## WORK ORDER AND FEE SCHEDULE

Phone: 785-456-8500 • PO Box 27, Sedalia, MO 65302

Name \_\_\_\_\_ Membership # \_\_\_\_\_

Address \_\_\_\_\_ Website \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail \_\_\_\_\_

Check one of the following:

Member       New Member Applying

### A. MEMBERSHIPS

|   | Quantity |       | Total Cost |
|---|----------|-------|------------|
| 1. Membership --Dues paid by January 31st _____   |          | 45.00 |            |
| 2..Membership--Dues paid after January 31st _____ |          | 65.00 |            |

### B. REGISTRATIONS/ RECORDATION

*(EWES ONLY, with F4 cross bring considered purebred "registered")  
 (No animals can be registered/recorded via AI/Embryo without a certificate from  
 AWUSA. Semen rights to all rams are held by AWUSA)*

|                                  |  |       |  |
|----------------------------------|--|-------|--|
| 1. 2 Years old and Younger _____ |  | 9.00  |  |
| 2. Older than 2 Years Old _____  |  | 18.00 |  |

### C. TRANSFERS

|  |  |       |  |
|--|--|-------|--|
| 1. Ewes under 60 days <i>(from date of sale)</i> _____ |  | 9.00  |  |
| 2. Ewes over 60 days <i>(from date of sale)</i> _____  |  | 18.00 |  |
| 3. Rams under 60 days <i>(from date of sale)</i> _____ |  | 9.00  |  |
| 4. Rams over 60 days <i>(from date of sale)</i> _____  |  | 18.00 |  |

|                                 |  |       |      |  |
|---------------------------------|--|-------|------|--|
| CI. DUPLICATE CERTIFICATE _____ |  | 12.00 | same |  |
|---------------------------------|--|-------|------|--|

|  |  |       |      |  |
|--|--|-------|------|--|
| CII. EMERGENCY FAXES <i>(per page - not including cover)</i> _____ |  | 25.00 | same |  |
|--|--|-------|------|--|

### F. SPECIAL HANDLING

|   |  |       |      |  |
|---|--|-------|------|--|
| 1. UPS Overnight Delivery _____                                 |  |       | same |  |
| 2. Postal Overnight, USPS <i>(two-three day delivery)</i> _____ |  | 30.00 | same |  |
| 3. Priority Mail, USPS <i>(four-five day delivery)</i> _____    |  | 10.00 | same |  |

*Call to order...  
Must provide credit card number  
for direct payment to UPS*

G. OTHER FEES \_\_\_\_\_

**TOTAL FEES FROM ABOVE**.....\$ \_\_\_\_\_

Previous Balance Due *(please return invoice)*.....\$ \_\_\_\_\_

Previous Credit Due *(please return invoice)* .....\$ \_\_\_\_\_

**TOTAL AMOUNT DUE** .....\$ \_\_\_\_\_

PAYMENT BY CHECK # \_\_\_\_\_ OR CREDIT CARD # \_\_\_\_\_

EXPIRATION DATE ON CARD \_\_\_\_\_ THREE DIGIT CODE ON BACK OF CARD \_\_\_\_\_

ZIP CODE OF BILLING ADDRESS \_\_\_\_\_ SIGNATURE OF CARDHOLDER \_\_\_\_\_

*All credit card transactions will be charged a 15 cent transaction fee and a 3.5% convenience fee on the total amount.*

• **ALL WORK requested MUST HAVE accompanying PAYMENT TO PROCESS** •

## Breeding Certificate

This is to certify that Ram \_\_\_\_\_ Registration # \_\_\_\_\_  
*(Ram Name & Tag Number)* *(Registration Number)*  
was exposed to Ewes \_\_\_\_\_  
*(List Ewe Names, Tag Numbers & Association Numbers)*  
from \_\_\_\_\_ to \_\_\_\_\_  
*(Month, Day, Year)* *(Month, Day, Year)*  
Owner of ewes at time of Mating: \_\_\_\_\_ Owner of ram at time of Mating: \_\_\_\_\_  
*(Signature)* *(Signature)*

## Breeding Certificate

This is to certify that Ram \_\_\_\_\_ Registration # \_\_\_\_\_  
*(Ram Name & Tag Number)* *(Registration Number)*  
was exposed to Ewes \_\_\_\_\_  
*(List Ewe Names, Tag Numbers & Association Numbers)*  
from \_\_\_\_\_ to \_\_\_\_\_  
*(Month, Day, Year)* *(Month, Day, Year)*  
Owner of ewes at time of Mating: \_\_\_\_\_ Owner of ram at time of Mating: \_\_\_\_\_  
*(Signature)* *(Signature)*  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

## Artificial Insemination Certificate

This is to certify that Ewes \_\_\_\_\_  
*(List Ewe Names, Tag Numbers & Association Numbers)*  
were AI'd with \_\_\_\_\_ units/straws of semen from Ram \_\_\_\_\_ Registration # \_\_\_\_\_  
*(# used)* *(Ram Name & Tag Number)* *(Registration #)*  
Technician Print Name: \_\_\_\_\_ Date of Service: \_\_\_\_\_  
Technician Signature: \_\_\_\_\_ Technician Contact Number: \_\_\_\_\_  
Owner of ewes at time of Mating: \_\_\_\_\_ Owner of ram / semen at time of Mating: \_\_\_\_\_  
*(Signature)* *(Circle one)* *(Signature)*  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

## Embryo Transfer Certificate

This is to certify that Ewe \_\_\_\_\_ Registration # \_\_\_\_\_  
*(Donor Ewe's Name & Tag Number)* *(Ewe's Registration Number)*  
was flushed and \_\_\_\_\_ eggs were recovered on \_\_\_\_\_ bred to Ram \_\_\_\_\_  
*(# eggs)* *(Month, Day, Year)* *(Ram Name & Tag Number)*  
Registration # \_\_\_\_\_ eggs were implanted into recipient ewes on \_\_\_\_\_  
*(Ram's Registration Number)* *(# eggs)* *(Month, Day, Year)*  
Technician Print Name: \_\_\_\_\_ Date of Service: \_\_\_\_\_  
Technician Signature: \_\_\_\_\_ Technician Contact Number: \_\_\_\_\_  
Owner of ewes at time of Mating: \_\_\_\_\_ Owner of ram / semen at time of Mating: \_\_\_\_\_  
*(Signature)* *(Circle one)* *(Signature)*  
Address: \_\_\_\_\_ Address: \_\_\_\_\_