Florida Standardbred Breeders and Owners Association
Stallion Residency Verification Statement
Breeding season for __________

Stallion
__________________________________

Farm
__________________________________

Farm Address
__________________________________

1. Date stallion arrived at the above farm ______________________

2. Is stallion still residing at the above farm? (circle one) YES NO

If no, please list date stallion departed the above farm ______________________

And, when stallion left, what was his destination? ______________________

OR

If no, date stallion died at the above farm ______________________

I do hereby certify that the above information is accurate. I also agree to notify the FSBOA in writing should there be any change to the above stallion’s residency in Florida.

Print Name of Stallion Owner/Manager ______________________

Signature ______________________

Date Signed ______________________