



**ShowMe Genetic Services, LLC**  
 8134 E. Hwy C  
 Strafford, MO 65757  
 417-736-2125 www.showmegen.com

Office Use Only:
CUST CODE: _____
BULL CODE: _____
BULL ARRIVAL DATE: _____

## CUSTOM COLLECTION AGREEMENT

Ranch Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

### Billing Information / Special Instructions:

If the billing for this bull is to be divided between multiple owners, please indicate those owners and their percentage of the billing below. **Note, the contact person listed above will be the point of contact for this bull.**

Owner 1. \_\_\_\_\_ % Billing: \_\_\_\_\_  
 Owner 2. \_\_\_\_\_ % Billing: \_\_\_\_\_  
 Owner 3. \_\_\_\_\_ % Billing: \_\_\_\_\_  
 Owner 4. \_\_\_\_\_ % Billing: \_\_\_\_\_

Other Special Instructions:

\_\_\_\_\_

\_\_\_\_\_

### Bull Information:

**\*Proper identification of the bull is the sole responsibility of the owner. Please provide accurate information below as well as a copy of the bull's current registration certificate, if applicable.**

Breed: \_\_\_\_\_ Reg #: \_\_\_\_\_ USDA 840 ID: \_\_\_\_\_  
 Bull Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Tattoo: \_\_\_\_\_

To your knowledge, has this bull ever been here before, even if under a different name or owner? Yes  No

### Collection Plan Options:

- Non-Health tested bull, authorized use of electro ejaculation
- Authorize ShowMe to test the bull for the following list of Pre-Isolation health tests on arrival and the use of electro ejaculation for collection until testing completed

OR

- Authorize ShowMe to test the bull for the following list of Pre-Isolation health tests on arrival and DO NOT approve the use of electro ejaculation
- Furnish prior to or upon arrival a Health Certificate by a licensed accredited veterinarian stating the bull does not display signs of any infectious, contagious diseases and has been tested within the last 30 days with negative results for the following tests. All test results must correlate to the animals USDA 840 ID.  
**1. Brucellosis BAPA or CF 2. BVDV PCR 3. Leptospirosis (5 serovar) 4. Trich PCR 5. TB (within 60 days)**

- Test bull for CSS export-qualified semen for the following countries \_\_\_\_\_

Units for Domestic (MUST fill in amount or circle range): \_\_\_\_\_ 100 to 300 300 to 500 500 to 800 800+  
 Units for CSS: \_\_\_\_\_

**\*\* Sign contract on next page.**

By signing, I acknowledge:

1. I am an owner of the bull listed and have rights to collect semen on said bull. If I am not the owner, I am an authorized agent of the owner(s) and have the right to collect semen on said bull.
2. The owner(s) agrees to pay all fees associated with housing, collection, storage and shipping of semen.
3. Owner(s) agrees to waive any claim against ShowMe Genetic Services for liability arising out of injury, sickness or death of the bull, or destruction or damage to semen unless resulting from ShowMe Genetic Services gross negligence or willful misconduct.
4. Owner(s) acknowledges and agrees that it is solely the owner's responsibility to acquire and maintain casualty or other insurance needed to cover the value of the customer's animal or injury to the animal. The owner hereby waives any right of subrogation that any insurer may have against ShowMe Genetics. Owner agrees that ShowMe Genetic Services' liability for any damage, injury, or destruction of the owner's animal should be and will be limited to no more than \$1,500.00, regardless of how the damage, injury, or destruction of the animal occurs, whether from accident, an act of God, ordinary negligence, gross negligence, intentional misconduct, or any other action or inaction of any agent, employee, or representative of ShowMe Genetic Services or any other party.
5. ShowMe Genetic Services will use its best efforts to collect, process, store, and distribute semen of the highest quality, but makes no warranty as to the quality or fertilizing capacity of semen and reserves the right to discard semen which does not meet its standards.
6. Semen will be released from storage upon request of Owners, provided ShowMe Genetic Services has received payment for all charges regarding said semen. Semen may be released to non-owners once written permission of release, indicating the amount to be released and the contact information for the recipient is provided by the Owner. A handling charge for the use of shipping container will be charged along with freight for any shipments. Charges for shipping can be billed to either the person receiving the shipment or the Owner(s). Export shipments will be charged a documentation fee for preparation of U.S. Origin Health Certificate and other export documentation. Handling and freight charges will apply also. Owner(s) agrees that if semen is lost, damaged, or destroyed during shipment, the risk of loss is on the owner and that ShowMe Genetic Services will not be liable for such loss, damage, or destruction.
7. All invoices are due and payable by the end of month billed. If the full amount is not paid when due, ShowMe Genetic Services will assess a finance charge. If the owner(s) fails to make payment within 90 days of any invoice date and such outstanding balance remains unpaid for 30 days following written notice to owner(s) by ShowMe Genetics Services, ShowMe Genetic Services will have the right to dispose of the semen without incurring liability to the owner or the third-party beneficiaries.
8. Each owner listed above of the bull is jointly and severally liable for all obligations owing to ShowMe Genetic Services pursuant to the agreement. Owner(s) will be responsible to ShowMe Genetic Services for all attorney fees and court costs incurred as a result of owner's failure to perform its obligations under this agreement.
9. Owner acknowledges and agrees to all statements on the Custom Collection Agreement. The parties agree that ShowMe Genetic services and its employees will be primarily responsible for the work required under the contract to obtain quality semen while maintaining a positive health status. The signee has read carefully the liability statements set forth above and agrees to adhere to all.
10. All reasonable veterinary fees shall be passed to owner.

**Typing my name below constitutes an electronic signature.**

Owner Signature: \_\_\_\_\_

Date: \_\_\_\_\_

ShowMe Genetics: \_\_\_\_\_

Date: \_\_\_\_\_