



STATEMENT OF OWNERSHIP

Name & Reg. No. of Quarter Horse or Thoroughbred Stallion\_\_\_\_\_

**On this Affidavit, identify the owner(s) name(s), resident address(es), and the percentage of ownership of all owners of this stallion.**

Is this stallion syndicated? Yes( ) No( ) Is this stallion owned by a corporation? Yes( ) No( ) An IL corporation? Yes( ) No( )  
(If you answered yes to either of the above questions please list individual shareholders or stockholders below.)

	OWNER(S) NAME(S) AND ADDRESS(ES):	PERCENTAGE OF OWNERSHIP
1.	_____ Name	
	_____ Address	_____ City State & Zip Co
2.	_____ Name	
	_____ Address	_____ City State & Zip Co
3.	_____ Name	
	_____ Address	_____ City State & Zip Co
4.	_____ Name	
	_____ Address	_____ City State & Zip Co
5.	_____ Name	
	_____ Address	_____ City State & Zip Co
6.	_____ Name	
	_____ Address	_____ City State & Zip Co

I hereby certify that this information is true and correct and that the above stallion meets all of the requirements for Illinois registration.

\_\_\_\_\_(Signature of Stallion Owner)

Date\_\_\_\_\_ 200\_\_