Health Papers Requirements

Client and Showman's Information		Show/Sale/ or Buyer Information		
Owner's Name, Address, phone#	Showman's name if different	Name of Show/Sale/or Buyer	Address of Show/Sale/or Buyer (include city and state), phone #	Date of Travel
Reason for travel	Person responsible during transport (Owner/Buyer/or Transporter)	Transportation method (truck/trailer, auto, etc.)	Other information	

Animal Information

Name	Date of Birth/Age	Breed	Sex	Color	Official ID