

BULL PURCHASE REQUEST FORM

Price Category: Red Class _____ Orange Class _____ Yellow Class _____

Selection Criteria:

Strain: _____ Strain: _____ Strain: _____

Number of Bulls: _____ Number of Bulls: _____ Number of Bulls: _____

| | RANK | | RANK | | RANK |
|-----------------------|--------------------------|-----------------------|--------------------------|-----------------------|--------------------------|
| Birth Weight: _____ | <input type="checkbox"/> | Birth Weight: _____ | <input type="checkbox"/> | Birth Weight: _____ | <input type="checkbox"/> |
| Birth Date: _____ | <input type="checkbox"/> | Birth Date: _____ | <input type="checkbox"/> | Birth Date: _____ | <input type="checkbox"/> |
| B-W ADG: _____ | <input type="checkbox"/> | B-W ADG: _____ | <input type="checkbox"/> | B-W ADG: _____ | <input type="checkbox"/> |
| Test ADG: _____ | <input type="checkbox"/> | Test ADG: _____ | <input type="checkbox"/> | Test ADG: _____ | <input type="checkbox"/> |
| 365 Day Weight: _____ | <input type="checkbox"/> | 365 Day Weight: _____ | <input type="checkbox"/> | 365 Day Weight: _____ | <input type="checkbox"/> |
| Scrotal Circ: _____ | <input type="checkbox"/> | Scrotal Circ.: _____ | <input type="checkbox"/> | Scrotal Circ.: _____ | <input type="checkbox"/> |
| Back Fat: _____ | <input type="checkbox"/> | Back Fat: _____ | <input type="checkbox"/> | Back Fat: _____ | <input type="checkbox"/> |
| Bull Colour: _____ | <input type="checkbox"/> | Bull Colour: _____ | <input type="checkbox"/> | Bull Colour: _____ | <input type="checkbox"/> |

RANK selection criteria in order of importance

1 being most important, **5** least important

Bull #'s from data
that fit requirements:

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that fit requirements:

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that fit requirements:

Beefbooster will make every attempt to select bulls that meet your selection requirements. Subject to availability, selection procedures, and limitation of liability set out the in the bull purchase contract.

Date: _____

Signature: _____