



# Substantiation of Value Breeding

Insured's Name:	
Name of Horse:	Date of Birth:
Sire / Dam:	
Purchase Date / Purchase Price:	

### Breeding Record of Mare

List of Sires	Years Foaled	Stud Fee Paid	Sex of Foals	Price When Sold
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$

Number of Foals Produced: \_\_\_\_\_

### Breeding Record of Stallion

Year	# of Outside Mares Bred	Stud Fees Earned	Home Bred Mares Bred	Income From Sales of Foals	# of Foals Produced
	#	\$	#	\$	#
	#	\$	#	\$	#
	#	\$	#	\$	#
	#	\$	#	\$	#
	#	\$	#	\$	#

Number of Foals Produced: \_\_\_\_\_

I, the undersigned, declare that to the best of my knowledge and belief the above statements are true and complete and that I have not withheld any material information. I further declare that no insurer has declined or refused to renew my bloodstock insurance, and that there are no other circumstances within my knowledge not already disclosed which might affect the proposed insurance.

Signed:	Date:
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