

**BILL OF LADING**

Taking of order									
The name of the establishment that produced the semen or its international code number: _____ _____ _____	Area N°: _____ Inseminating establishment N°: _____								
Date on which the order was taken: _____ _____									
Billed to: Name: _____ Address: _____ _____ _____	Delivered to: Date: _____ Name: _____ Address: _____ _____ _____								
Permit N°: _____ Certificate N°: _____									
Bull		Quantity (doses)			Price				
Code	Name	Registration N°	Collection Date or Lot N°	Ordered	Delivered	To follow	Billed	Unit	Total

Order delivered by: \_\_\_\_\_

Customer's signature: \_\_\_\_\_

Delivery date: \_\_\_\_\_