

## CUSTOMER TESTIMONIAL RELEASE FORM

Testimonial statement:

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I have read the authorization and release information and give my consent for the use as indicated above.

Signature \_\_\_\_\_

Name \_\_\_\_\_

Farm Name \_\_\_\_\_

Email \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Number of cows milked \_\_\_\_\_

Product used \_\_\_\_\_

Date \_\_\_\_\_