Florida Horse Bill of Sale Form

Date of Sale:		
	1. Seller Information	2. Buyer Information
Name		
Address		
City, State, ZIP		
Phone Number		
Email Address		
 Breed:		
4. Health and Vaccination R	ecords:	
General Health Cond	ition:	
 Date of Last Veterina 	ry Visit:	
 Vaccination Details: 		<u> </u>
 Coggins Test Results 	$: \square$ Positive \square Negative (Da	ate:
)	

le Conditions:	
Sale Price: \$	
Payment Method:	
○ □ Cash	
○ □ Check	
○ □ Credit Card	
○ □ Other:	
Terms of Sale:	
\circ The horse is sold "as-is," with no	warranties expressed or implied.
 The seller guarantees that the ho 	rse is free from all known diseases
and liens.	
Right of First Refusal: Yes No (If y Trial Period: Offered Not Offered (terms:) gnatures:	
Seller's Signature:	Date:
Buyer's Signature:	Date:
Witness's Signature (if applicable):	
tional Notes:	
	Sale Price: \$