

Colorado Sheep & Wool Authority
PRIVATE TREATY PURCHASE REPORT & PROOF OF ASSESSMENT

Seller Information:

Name _____

Phone _____ SS# or Tax ID _____

Address _____

City _____ State _____ Zip Code _____

Email _____

Buyer Information:

Name _____

Phone _____ SS# or Tax ID _____

Address _____

City _____ State _____ Zip Code _____

Email _____

Transaction/Sale Report:

Date of Sale _____

Number of sheep (lambs, ewes, rams) sold _____ x \$0.25 = _____ Assessment Deducted

Number of sheep (lambs, ewes, rams) fed in Colorado for 30 days or more
_____ x \$0.25 = _____ Assessment Deducted

Certification: I hereby certify that the above information is correct and accurate to the best of my knowledge. I am aware that false information or failure to report may result in civil and administrative penalties.

Seller's Signature

Buyer's Signature

Date

Mail the form to

**Colorado Sheep & Wool Authority
PO Box 292
Delta, CO 81416-0292**

**(970) 874-1433 • (970) 874-4170 fax
cwgawool@aol.com • coloradosheep.org**