Exceptional Equestrians
of the Missouri Valley, Inc.
785 Yellow Finch Ln.
Washington, MO 63090
636 390-2141

Transfer of Ownership

Name of Horse _Shadow_____Sex ___Gelding_____

Breed _Tennessee Walker_____ Registration No. ___ Age __19_ Color _Black

Exceptional Equestrians, a 501(c) (3) non-profit organization transfers total ownership of the above horse to:

Name of New Owner ___ _____

Address ___505 Neighborhood Rd..

City _New Haven_____ State ___MO_____Zip Code _63068 _____

_____ _____
Signature of New Owner Date

Waiver of Liability

Exceptional Equestrians makes no warranties concerning the condition, health, temperament, soundness, or fitness of above horse. Exceptional Equestrians, its officers, directors, representatives, volunteers, and staff members are not liable for any representations or misrepresentations concerning the above horse.

_____ _____
Signature of Administrative Manager Date