

STANDARD BRED OWNERS OF MASSACHUSETTS, INC.

P.O. Box #1682

Plainville, MA 02762

Phone: 508-528-1877 – email: info@sominc.net

## STATEMENT OF MARE'S RESIDENCE 2017

Name of Mare \_\_\_\_\_ Age \_\_\_\_ Color \_\_\_\_\_ Tattoo # \_\_\_\_\_

Mare's Present: Owner, Lessee or Agent, (Please circle one)

Owner, Lessee, or Agents Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone # \_\_\_\_\_

### MARE'S LOCATION ON DECEMBER 1<sup>ST</sup> OF THIS YEAR 2016

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

Farm Owner \_\_\_\_\_

Farm Address \_\_\_\_\_ MA \_\_\_\_\_  
Street City or Town Zip

Phone Number \_\_\_\_\_

### 2016 BREEDING INFORMATION

Mare in Foal to \_\_\_\_\_ Last Breeding Date \_\_\_\_\_

Location of Stallion; \_\_\_\_\_  
Name of farm

\_\_\_\_\_  
Address Town, State, Zip

X \_\_\_\_\_ Date \_\_\_\_\_  
Signature of Breeder (Owner, Lessee, Agent)

Note: A copy of the Mare's Registration must be submitted along with this form.

This form and registration fee of \$25.00 must be submitted to S.O.M., Inc. no later than December 1<sup>st</sup>, 2016. Checks should be made payable to: S.O.M., Inc., and mailed to: S.O.M., Inc., PO Box #1682, Plainville, MA 02762. If you have any questions you may contact a SOM representative at (508) 528-1877.

**\*\*Reminder\*\* All Resident mares must also be registered with the Department of Agricultural Resources, Bureau of Animal Health by December 1, 2016. No Exceptions. Forms available at [www.sominc.net](http://www.sominc.net) or contact the Department at (617) 626-1792 for the appropriate form.**