



DATE: _____

State Of Oklahoma **Oklahoma Horse Racing Commission**

OKB STATUS REPORT

(Please circle	one)					
	Quarter Horse	Paint	Appaloosa	Thoroughl	bred	
Name of Horse	2:		OKB NO.			
Color			Tattoo/Microchip	#		
Last date bred			Due date (approx)			
(If applica	ble)		(If applica	able)		
<u>CURRENT OW</u> Name	NER:		Telephone			
	PREVIOUS LOC	ATION		NEW LOCATION		
Name			Name			
Address			Address			
City,State,Zip			City,State,Zip			
Telephone			Telephone			
Date Left			Date Arrived			
PLEASE INDICA		ON STATUS (Check One):				
	Mare is	in foal as bred, but came up open		_ Mare was not bred/no Mare/Stallion is deceas		
		ill not foal in OK		_ Mare/Stallion was sold		
				-		
		Name				
		Address				
		City, State, Zip				
		Date Sold				
IF MARE/STAL	LION IS LEAVING	<u>THE STATE:</u>				
	Initial one of the	following:				
	Medical Procedu	Ire: Submit within 14 days	after the mare/stallion l	eaves Oklahoma with do	<u>cumentation</u>	
		nedical procedure is required to b				
	tha	t involves an extraordinary medi	cal situation and the owr	ner of the mare desires to	have an expert located	
	out	side of Oklahoma conduct the pr	rocedure. Information re	lating to the procedure is	included with this form.	
	Racing:	acing: Submit within 14 days before the mare/stallion leaves Oklahoma with documentation				
	The	The owner of the horse desires to race the them in a sanctioned meet outside of Oklahoma.				
	l ur	I understand the mare shall return to Oklahoma by August 15 and shall be located in Oklahoma for foaling.				
		Information relating to the rece meet is included with this form.				
	Sale Consignmer	it: <u>Submit within 14 days</u>	before the mare/stallion	<u>n leaves Oklahoma with d</u>	locumentation	
	The	e mare is entered into a catalogu	entered into a catalogued sale held outside of Oklahoma. I understand the mare shall return to			
	Okl	ahoma no later than 30 days afte	no later than 30 days after the sale and shall be located in Oklahoma for foaling.			
		Shilah Arnold- (Oklahoma Bred Ins	pector	SEE BACK	
			orse Racing Commis			
Return this form to:			2800 N. Lincoln Blvd, Suite 220 Direct Tel: (405) 522-5			
DHRC-178 REV. 9-1 SA			Oklahoma City, OK 73105		mail: sarnold@ohrc.	

277 Email: sarnold@ohrc.org

IMPORTANT:

* Any change in domicile is requested to be reported to the OK Bred Inspector before or directly after any change has been made

* A completed form is requested within 14 days of the change in location

* Horses accredited in the OK Bred Program will be subject to periodic inspections to verify compliance with the rules of the program

* 1 FORM PER MARE/STALLION

Other requirements are:

A. Both mares and stallions must keep their domicile in the state of OK throughout the entire yearB. It is the owner's responsibility to provide the burden of proof to the OK Bred officeif horses are going to leave the state.

<u>PLEASE CALL YOUR INSPECTOR OR THE OFFICE 30 DAYS PRIOR TO ANY CHANGE IN DOMICILE.</u> OFFICE TELEPHONE NUMBER: (405) 943-6472 - FAX NUMBER (405) 943-6474. NOTIFY THE OFFICE IMMEDIATELY IF YOUR MARE CHANGES LOCATION.

For complete rules, regulations, and forms please visit our website www.ohrc.ok.gov

PRINTED NAME:

SIGNATURE:

DATE: