

**CATTLE STATS LLC**  
9421 N. ROBINSON  
OKLAHOMA CITY, OK 73114  
405-607-4522  
Fax # 405-842-2285

**BVD TESTING CLIENT INFORMATION**

Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Home: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

\*\*\*Please circle preferred method to be contacted with results.

Business FEIN Number: \_\_\_\_\_

Social Security Number (if no FEIN): \_\_\_\_\_

Bank: \_\_\_\_\_

I understand and agree that all charges are due by the 10<sup>th</sup> of the following month. After 30 days any outstanding amount will be subject to interest of 1.75% (21% annually), or a minimum of \$2.00, whichever is greater. I also understand that if my account becomes delinquent, CATTLE STATS, LLC reserves the right to deny me any further testing. After four months delinquency any account not paid will be turned over to our attorney for collection.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date