

CB Genetics, LLC Client Contract Form

This form is required to be completed before any IVF services are done.

I hereby acknowledge that I have read the CB Genetics, LLC Pricing Guidelines and agree to all fees listed.

I hereby acknowledge that CB Genetics, LLC is not responsible for any injury that may occur to the donor(s) during any stage of the IVF process.

I hereby acknowledge that CB Genetics, LLC, and its employees are not to held liable for any injury to cattle or personnel that could occur during the Aspiration or Transfer services.

I hereby acknowledge that ALL fees must be paid in full PRIOR to picking up any cattle in our Recip or Weaned Calf Program.

I hereby acknowledge that if client's donor(s) are held at a CB Genetics, LLC facility for Donor Housing that CB Genetics, LLC is NOT reliable for any injuries while in our care.

I hereby acknowledge that ALL INVOICES ARE DUE IN FULL 30 DAYS from invoice due date. If invoice(s) are not paid in full, client will be charged a 5% financial interest charge per invoice total amount and each month thereafter. Embryos will NOT be released until payment has been made.

CB Genetics, LLC can assure you that our employees will take all precautions for the safety and well-being of client's cattle while in our care.

Please check the box if you would like to receive invoice(s) by email.

By signing below client agrees to all terms and conditions listed above on contract.

Print Name: _____

Signature: _____

Date: ___/___/___

GENETICS

CB Genetics, LLC

PO Box 2133 Center, TX 75935