## TRANSFERS

You are required to **MAIL original CoRs to the registry** for sign-off for a transfer to be complete. Originals will be returned to you. **Mail to: HSSR, PO Box 667, Westminster, TX 75485** 

Member ID #	First Name	Last Name (or Corp name)
TRANSFER # 1		
HSSR Registration # As shown on the original Co	-	ne (as appears on CoR)
TRANSFER #		
HSSR Registration # As shown on the original Co		ne (as appears on CoR)
PAYMENT	_	uin Sheep
TOTAL # OF TRANSFE		/ & Registry TOTAL DUE
Member #	First Name	Last Name (or Corp name if applicable)
<b>Card #</b> (debit or credit)	Exp D	ate CVV
Signature		Date

If you need to Transfer more than 2 sheep, print the next page as many times as you need, but fill out the Payment section once for all Transfers

