



**NOTICE OF WITHDRAWAL OF FOAL FROM THE  
KENTUCKY THOROUGHBRED BREEDERS'  
INCENTIVE FUND PROGRAM  
(KHRC Form 20-7) (4/06)**

**KENTUCKY HORSE RACING COMMISSION**  
4063 Iron Works Parkway, Building B, Lexington, KY 40511, Phone: 859-246-2847 Fax: 859-246-2887  
[www.khrc.ky.gov](http://www.khrc.ky.gov)

Please go to [www.khrc.ky.gov](http://www.khrc.ky.gov) for an interactive online application.  
Please print clearly.

**BREEDER INFORMATION:**

(Owner)—(Print the name of the intended breeder of record as it will be reported to the Jockey Club). If multiple owners, partnership, corporation, etc. list according to the intended Jockey Club filings and use the managing owner's contact information below. Be sure to clearly identify the managing owner or entity name above.

\_\_\_\_\_  
(Street) (City) (State) (Zip)  
\_\_\_\_\_  
(Phone Number) (Fax Number) (E-Mail Address)

NAME OF MARE	MARE'S YEAR OF BIRTH	SIRE OF DAM	COVERING SIRE	DATE MARE WAS OR WILL BE MOVED FROM KY. (MONTH, DATE, YEAR)

**AFFIDAVIT BY BREEDER OR THE AUTHORIZED AGENT.** I hereby certify that I desire to move the above mare outside of Kentucky and no longer wish to be eligible to receive an award under the Kentucky Thoroughbred Breeders' Incentive Fund for the foal resulting from the mare.

\_\_\_\_\_  
QUALIFIED BREEDER OR AUTHORIZED AGENT (print name) (signature)  
If by agent, Authorized Agent Form must be on file with the KHRC

**THIS FORM MUST BE FILED WITHIN 14 DAYS OF MOVING THE MARE FROM KENTUCKY.**

Received by: \_\_\_\_\_ (KHRC Staff)  
Date: \_\_\_\_\_ Time: \_\_\_\_\_  
\_\_\_\_\_  
(Registration Number of mare supplied by The Jockey Club)

**Approval of the Executive Director of the Kentucky Horse Racing Commission:**  
\_\_\_\_\_  
Date: \_\_\_\_\_

**Reported to the Kentucky Horse Racing Commission on Date:** \_\_\_\_\_