



Breeder #: 00000
Total Awarded: \$0.00
(Full Breakdown on Back)

Kentucky Quarter Horse Development Fund Application For Breeder Award

** Qualifying Races and Total Awards Earned are Located on the Back of This Form. **

To Claim Your Award Check:

Please print clearly and submit the completed form either by mail, fax or email to:

KENTUCKY HORSE RACING & GAMING CORPORATION
4047 Iron Works Parkway | Lexington, Kentucky 40511
Ph: 859-246-2847 | Fax: 859-246-2887 | Email: kbif.khrc@ky.gov

Deadline to Claim Award: December 31st

Award Check Will Be Made Payable to the Breeder of Record According to the AQHA

Breeder Name(s) or Entities CANNOT be CHANGED or REMOVED

KQHDF Award Winner: _____

Social Security or US Tax ID No. _____
Required to receive an Award Check

Street _____ **City** _____ **ST** _____ **Zip** _____

Phone _____ **Fax** _____ **E-Mail** _____

AFFIDAVIT BY QUALIFIED BREEDER OR THEIR AUTHORIZED AGENT I hereby certify that the information contained in this application is accurate and complete, and I understand that any material misrepresentation or omission in this application may subject me to all applicable penalties under 810 KAR 7:070, and any other applicable penalty available under Kentucky law. I hereby certify that each horse submitted on the back of this form is eligible for an award from the KQHDF, that I am a breeder of record according to The American Quarter Horse Association (AQHA), and that I am entitled to the award. I understand that failure to meet any requirement contained in 810 KAR 7:080 may subject me to the penalties contained therein and other applicable penalties provided by Kentucky statute or regulation. I agree to promptly provide any additional information requested by the corporation relating to the registration(s) or the registration(s) may be denied or revoked. All filings are subject to audit by the corporation and filing fees are non-refundable.

Breeder (Print Name)

(Signature)