

FOR OFFICE USE ONLY

BUYER APPROVAL

NAME/ BUSINESS:			
ADDRESS:			
CITY/STATE/ZIP:			
PHONE/CELL:	DRIVER'S LICENCE #:		
Are you bonded: YES	If yes, AMOUNT \$	NO	
I hereby certify that the cattl representations made by this		comply with all management practices and	
	Reference Inform	nation	
Bank Name:	Branch	Branch Location:	
City/State:	Contact Name:	Phone:	
Funds will be paid from the f	following account:		
Checking:	Loan/Line of credit account:		
above to release informatio information on credit availa public network is not secure	on concerning my business' financi lble. Although I am aware that elec e, I nevertheless authorize my ban elephone, fax, and email. A signec	bank, and authorize the bank stated ial responsibility, and to update ctronic transmission of information over lik to provide the information to Montana d copy or facsimile of this authorization	
		due immediately. If livestock are not paid e will be applied to the entire purchase	
Signature	Date		