

**INTERNATIONAL CANINE SEMEN BANK-WISCONSIN • (ICSB-WI/IL)**

Veterinary Village N11591 Columbia Drive • Lomira, Wisconsin 53048  
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**REQUEST TO DESTROY FROZEN CANINE SEMEN BY FROZEN SEMEN OWNERS**

This document, when completed, dated, signed, and witnessed, requests ICSB-WI/IL to destroy the frozen canine semen ("Semen") listed below. All known Owners of this Semen must sign this document before the Semen will be destroyed. If ICSB-WI/IL has any reason to doubt the authenticity of a destroy request, ICSB-WI/IL may delay acting until reasonably assured of its authenticity, and will not be held liable by Owner or any third party for any direct or indirect consequences of the delay. Storage fees will accrue until all signatures have been received. The account must be paid in full.

\_\_\_\_\_  
(Printed name of present owner(s) of frozen semen)

transfer all rights of ownership and interest in the following frozen semen to International Canine Semen Bank – Wisconsin/Illinois for the semen to be destroyed. Destroy means the semen will no longer be stored and will no longer be available and viable for use to breed a female with. This request is for the frozen canine semen on the dog listed below to be destroyed:

Name of Owner		Name of Co-owner/agent	
Registered name of dog		Call name of dog	
Registered number of dog		Microchip/tattoo number	
Breed of dog		DNA number of dog	
Color		Date of birth	
Sire's registered number		Dam's registered number	

The following semen from the above dog is to be destroyed:

\_\_\_\_\_ (Initials) Date of Collection: \_\_\_\_\_ Number of breeding units \_\_\_\_\_

\_\_\_\_\_ (Initials) Date of Collection: \_\_\_\_\_ Number of breeding units \_\_\_\_\_

\_\_\_\_\_ (Initials) Date of Collection: \_\_\_\_\_ Number of breeding units \_\_\_\_\_

I request that the specific frozen semen units listed above be destroyed:

\_\_\_\_\_  
(Owner(s) sign here if you request Semen from the units listed above to be destroyed.) (Date)

Or I request that ALL semen from the above Dog is to be destroyed:

\_\_\_\_\_  
(Sign here if you request ALL Frozen Semen from this Dog to be destroyed.) (Date)

\_\_\_\_\_  
(Printed name of Witness)

\_\_\_\_\_  
(Witness signature)

Semen destroyed by \_\_\_\_\_ (Tech). Verified by \_\_\_\_\_ (Dr)