



## SALES AGREEMENT

### BUYER'S INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

AKC#: \_\_\_\_\_

MICROCHIP: \_\_\_\_\_

DOB: \_\_\_\_\_

PURCHASE AMOUNT: \_\_\_\_\_

DEPOSIT: \_\_\_\_\_

BALANCE DUE: \_\_\_\_\_

This document's purpose is to create a written record of the transaction between Kellner Labradors and the buyer mentioned above. This sale should serve as proof of purchase and expense for acquiring the animal described above.

It is also the intent of this document to clarify a purchasing policy that provided by Kellner Labradors. It should be the understanding of both parties that while this sale is final, we will always be willing to work with the buyers in the event of a change of circumstance regarding the dog being sold. If, at any time, the owners of this dog should find themselves in a situation where they are no longer capable or willing to care for the dog, Kellner Labradors should be contacted and a custom agreement will be reached so that the best care possible can be provided for the dog. Never, at any point, should any dog produced by Kellner Labradors be subject to a long-term animal care shelter.

All puppies are sold with LIMITED REGISTRATION. Should the buyer determine they want to breed the dog in the future, the following requirements must be met at the cost of the buyer. Once proof of all requirements has been provided, Kellner Labradors will allow FULL REGISTRATION at no additional charge from Kellner Labradors. Thank you for helping us to better the breed by only breeding dogs that have superior genetics and superior health screening results.

Required health testing and results for release of Limited Registration to Full Registration:

1. PENNHip Distraction Index score of less than 0.40
2. OFA Certified Hips: Excellent (Good will be accepted if the Distraction Index is less than 0.35)
3. OFA Certified Elbows: Normal
4. Current OFA CERF Eye Exam: Normal
5. Clear PawPrints Labrador Panel or Equivalent
6. Non-Dilute/ does not carry dilute gene

Both Buyer and Seller agree to the terms of the SALES RECEIPT and the TWENTY-SIX MONTH HEALTH GUARANTEE

BUYER'S SIGNATURE: \_\_\_\_\_ SAMPLE AGREEMENT

SELLER'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**BEN AND CASEY  
KELLNER**

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