

INTERNAL USE	
Wool Clip	
P/A No:	
Sale Date:	

Trading Name:
Account No:
Address:
Email:
Telephone:
GST No.

Farm Brand:
Breed:
Classer No:

PLEASE MARK USING X WHERE APPLICABLE									
Does this wool come from a farm that meets the requirements of the NZ Farm Assurance Programme?	Y		N						
If YES NZ Farm Assurance Code (NZFAP):									
Hold until balance arrives:				Consignment Complete:					
Transport Provider:									

AUCTION **A** CONTRACT **C** PRIVATE **P** DOOR SALE **D**

[illegible][illegible]

Deliver to: PGG WRIGHTSON LTD

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