



UHC Operation Gelding Program – CLINICS Veterinary Statement for Clinics

This form must be completed and signed by the attending veterinarian and returned to the host organization along with an invoice for castration services (and W-9 if receiving >\$600). The host organization will submit all required forms and materials to the UHC within 30 days of the gelding clinic in order for funds to be dispersed. Checks are printed on the 1st and 15th of each month.

Name of Attending Veterinarian: _____

Name of Host Organization: _____

Number of Horses Castrated: _____ Date of Castrations: _____

Address to Send Reimbursement Check: _____

Please include the following documents with this form:

- Receipts or Invoices showing total number of stallions castrated. This can be one invoice for all castrations or separate invoices for each stallion.
- W-9 form for organization receiving the check (if >\$600).

Note: Veterinarians may elect to be paid directly by the host organization because the gelding reimbursement amount (\$60 or \$100 per horse) will be based on specific items provided by the host organization to the UHC.

Signature of Veterinarian: _____ Today's Date: _____

All arrangements for services performed at this Operation Gelding Clinic are between the veterinarian and the client / host organization. The Unwanted Horse Coalition assumes no liability for services performed by the attending veterinarian or representatives of the sponsoring event.

If you have any questions about Operation Gelding or the reimbursement, please contact the UHC Director at afurst@horsecouncil.org or 202-846-1607.

**Return this form along with receipts and/or invoices (and the W-9 if necessary)
to the host organization, which will submit all materials required for reimbursement to the
Unwanted Horse Coalition.**

