

SCHEDULE O – INOVULATION CERTIFICATE



a) DONOR SECTION

DONOR FEMALE

NAME BOS20 0289 or _____

COMPUTER NR _____ or IDENTIFICATION NR _____ HDM YY SEQ _____

DONOR MALE

NAME BOS18 8495 or _____

COMPUTER NR _____ or IDENTIFICATION NR _____ HDM YY SEQ _____

b) MULTI SIRE SECTION

COMPUTER NR BOS13 3097 or IDENTIFICATION NR _____ HDM YY SEQ _____

COMPUTER NR _____ or IDENTIFICATION NR _____ HDM YY SEQ _____

COMPUTER NR _____ or IDENTIFICATION NR _____ HDM YY SEQ _____

COMPUTER NR _____ or IDENTIFICATION NR _____ HDM YY SEQ _____

COMPUTER NR _____ or IDENTIFICATION NR _____ HDM YY SEQ _____

c) FERTILISATION SECTION

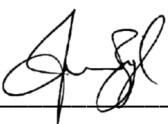
FERTILISATION DATE 09/M/08/2024

d) COLLECTION SECTION

COLLECTION DATE 08/M/08/2024 Number of embryos 8

VETERINARIAN / TECHNOLOGIST NUMBER

D83/2057
_ _ _ _ _ VET/TEC



SIGNATURE OF VETERINARIAN/ TECHNOLOGIST