



Suid-Afrikaanse Stamboek- en Diereverbeteringsvereniging
(Geregistreer in terme van Wet 62 van 1998)

South African Stud Book and Animal Improvement Association
(Registered in terms of Act 62 of 1998)

SA STAMBOEK
STUD BOOK

Adres/Address 118 Henry str, Westdene, Bloemfontein | Posbus / PO Box 270, BLOEMFONTEIN, 9300
Telefoon/Telephone: (051) 448-9347 | Faks/Fax: (051) 447-3964 | e-Pos/Mail: info@studbook.co.za | Web: www.studbook.co.za

Schedule O - Inovulation Certificate

A) DONOR INSEMINATION SECTION

1. DOCUMENT CODE:	2. BREED CODE: *	3. PARTICIPANT NUMBER - OWNER OF DONOR FEMALE: *
4. PARTICIPANT NAME - OWNER OF DONOR FEMALE:		
5. FULL NAME OF DONOR FEMALE:		
6. REGISTRATION NUMBER OF DONOR FEMALE: *	7. IDENTIFICATION OF DONOR FEMALE:	8. LABORATORY DNA NUMBER OF DONOR FEMALE: *
9. FULL NAME OF DONOR MALE:		
10. REGISTRATION NUMBER OF DONOR MALE: *	11. IDENTIFICATION OF DONOR MALE:	12. LABORATORY DNA NUMBER OF DONOR MALE: *
13. DATE OF INSEMINATION: *		
14. BATCH NUMBER OF SEMEN / SEMEN CODE:		
15. MULTI SIRE GROUP: DEFINE MULTI SIRE GROUP (if Multiple refer to Section E, page 2)		

B) PERMIT DETAILS

16. AUTHORISATION NUMBER:	17. VETERINARY MASTER PERMIT NO:	18. NO MASTER ☐
19. VALID FROM:	20. EXPIRY DATE:	
21. AUTHORISATION GRANTED TO: (PARTICIPANT DETAILS)		
22. NAME OF ANIMAL:		
23. INTERNATIONAL / REGISTRATION NUMBER OF ANIMAL:		
SIGNATURE OF INSEMINATOR		

C) EMBRYO FLUSHING SECTION

24. FLUSHING DATE: *	25. NUMBER OF EMBRYO'S: *
I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND THE EMBRYOS WERE FLUSHED, PROCESSED AND MARKED CORRESPONDING TO ACT 25 OF 1977.	
26. DATE: *	SIGNATURE OF VETERINARIAN

D) EMBRYO TRANSFER SECTION (if Multiple refer to Section F, page 2)

27. PARTICIPANT NUMBER - OWNER OF RECIPIENT FEMALE: *	Member nr Herd Breed Code
28. PARTICIPANT NAME - OWNER OF RECIPIENT FEMALE:	
29. RECIPIENT BREED:	30. RECIPIENT BREED CODE: *
31. IDENTIFICATION OF RECIPIENT: *	Breed Sex HDH Year Seq



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Schedule O - Involution Certificate

A) DONOR INSEMINATION SECTION

1. DOCUMENT CODE:	2. BREED CODE: *	3. PARTICIPANT NUMBER - OWNER OF DONOR FEMALE: *
4. PARTICIPANT NAME - OWNER OF DONOR FEMALE:		
5. FULL NAME OF DONOR FEMALE:		
6. REGISTRATION NUMBER OF DONOR FEMALE: *	7. IDENTIFICATION OF DONOR FEMALE:	8. LABORATORY DNA NUMBER OF DONOR FEMALE: *
9. FULL NAME OF DONOR MALE:		
10. REGISTRATION NUMBER OF DONOR MALE: *	11. IDENTIFICATION OF DONOR MALE:	12. LABORATORY DNA NUMBER OF DONOR MALE: *
13. DATE OF INSEMINATION: *		
14. BATCH NUMBER OF SEMEN / SEMEN CODE:		
15. MULTI SIRE GROUP: DEFINE MULTI SIRE GROUP (if Multiple refer to Section E, page 2)		

B) PERMIT DETAILS

16. AUTHORISATION NUMBER:	17. VETERINARY MASTER PERMIT NO:	18. NO MASTER ☐
19. VALID FROM:	20. EXPIRY DATE:	
21. AUTHORISATION GRANTED TO: (PARTICIPANT DETAILS)		
22. NAME OF ANIMAL:		
23. INTERNATIONAL / REGISTRATION NUMBER OF ANIMAL:		
SIGNATURE OF INSEMINATION		

C) EMBRYO FLUSHING SECTION

24. FLUSHING DATE: *	25. NUMBER OF EMBRYO'S: *
I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND THE EMBRYOS WERE FLUSHED, PROCESSED AND MARKED CORRESPONDING TO ACT 25 OF 1977.	
26. DATE: *	SIGNATURE OF VETERINARIAN

D) EMBRYO TRANSFER SECTION (if Multiple refer to Section F, page 2)

27. PARTICIPANT NUMBER - OWNER OF RECIPIENT FEMALE: *	Member nr Herd Breed Code
28. PARTICIPANT NAME - OWNER OF RECIPIENT FEMALE:	
29. RECIPIENT BREED:	30. RECIPIENT BREED CODE: *
31. IDENTIFICATION OF RECIPIENT: *	



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Schedule O - Involvement Certificate

A) DONOR INSEMINATION SECTION

1. DOCUMENT CODE:										2. BREED CODE: * A A N										3. PARTICIPANT NUMBER - OWNER OF DONOR FEMALE: * 0 6 7 2 4 7 6									
4. PARTICIPANT NAME - OWNER OF DONOR FEMALE:										B L A C K S M I T H																			
5. FULL NAME OF DONOR FEMALE:										D E P A N N E										R E D H A T 3 0 E									
6. REGISTRATION NUMBER OF DONOR FEMALE:										7. IDENTIFICATION OF DONOR FEMALE:										8. LABORATORY DNA NUMBER OF DONOR FEMALE:									
* 0 0 6 8 3 2 2 5 4 4										OR										* U 2 9 3 9 3 5									
9. FULL NAME OF DONOR MALE:																													
10. REGISTRATION NUMBER OF DONOR MALE:										11. IDENTIFICATION OF DONOR MALE:										12. LABORATORY DNA NUMBER OF DONOR MALE:									
* 0 0 9 1 4 7 4 3 4 6										OR										*									
13. DATE OF INSEMINATION:										14. BATCH NUMBER OF SEMEN / SEMEN CODE:																			
*																													
15. MULTI SIRE GROUP:																				DEFINE MULTI SIRE GROUP (if Multiple refer to Section E, page 2)									

B) PERMIT DETAILS

[illegible]

C) EMBRYO FLUSHING SECTION

24. FLUSHING DATE: *

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25. NUMBER OF EMBRYO'S: *

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I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND THE EMBRYOS WERE FLUSHED, PROCESSED AND MARKED CORRESPONDING TO ACT 25 OF 1977.

26. DATE: *

1	3	1	0	2	0	2	1
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SIGNATURE OF VETERINARIAN _____

D) EMBRYO TRANSFER SECTION

D) EMBRYO TRANSFER SECTION (if Multiple refer to Section F, page 2)

[illegible]