

Subject: Fwd: Windmeul Skedule O Vorms
From: Theuns Bruwer <Theuns@wwsires.co.za>
Date: 2022/06/22, 03:24 pm
To: Marietjie Delpont <marietjie@studbook.co.za>

Hi Marietjie.

Hierby die skedule o vorms mbt tot die embriokalf wat geregistreer moet word op die vorige email.

Die hare is reeds in vir dna en sal die ouerskap bevestiging vir jou aanstuur sodra ek die resultate kry. laat weet asb of alles in orde is. Die betrokke koei is 3 keer gespoel en die veearts het n skedule o vorm vir elke spoeling geteken.

Groete
Theuns Bruwer
Windmeul Angus Stoet
Sent from my iPhone

Begin forwarded message:

From: Debbie Bruwer <Debbie@wwsires.co.za>
Date: 22 June 2022 at 15:20:04 SAST
To: Theuns Bruwer <Theuns@wwsires.co.za>
Subject: Windmeul Skedule O Vorms

-----Original Message-----

From: kyocera@wwsires.co.za <kyocera@wwsires.co.za>
Sent: Wednesday, 22 June 2022 15:32
To: Debbie Bruwer <Debbie@wwsires.co.za>
Subject: Scan Received

Please do not reply

ECOSYS M3540idn
[00:17:c8:53:92:66]

Attachments:

Scan03827220220622153127.pdf

1,0 MB



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)

STB Bar Code

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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 - Involuation 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: *	Breed	Sex
	HDM	Year
		Seq



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Schedule O - Inovulation Certificate

A) DONOR INSEMINATION SECTION

1. DOCUMENT CODE:	2. BREED CODE: * AAN	3. PARTICIPANT NUMBER - OWNER OF DONOR FEMALE: * 0700642
4. PARTICIPANT NAME - OWNER OF DONOR FEMALE: WINDMEUL ANGUS STOET		
5. FULL NAME OF DONOR FEMALE: WINDMEUL RED ANNY 1403-ET		
6. REGISTRATION NUMBER OF DONOR FEMALE: * 0080074953	7. IDENTIFICATION OF DONOR FEMALE:	8. LABORATORY DNA NUMBER OF DONOR FEMALE: * 221021
9. FULL NAME OF DONOR MALE: SIGN E		
10. REGISTRATION NUMBER OF DONOR MALE: *	11. IDENTIFICATION OF DONOR MALE:	12. LABORATORY DNA NUMBER OF DONOR MALE: *
13. DATE OF INSEMINATION: * 30042021		
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

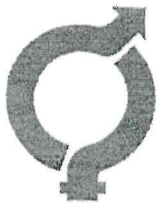
16. AUTHORISATION NUMBER:	17. VETERINARY MASTER PERMIT NO:	18. NO MASTER ☐
19. VALID FROM: DDMMYYYY	20. EXPIRY DATE: DDMMYYYY	
21. AUTHORISATION GRANTED TO: (PARTICIPANT DETAILS) 		
22. NAME OF ANIMAL: 		
23. INTERNATIONAL / REGISTRATION NUMBER OF ANIMAL: 		
SIGNATURE OF INSEMINATION		

C) EMBRYO FLUSHING SECTION

24. FLUSHING DATE: * 08052021	25. NUMBER OF EMBRYO'S: * 001
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: * 22062022	SIGNATURE OF VETERINARIAN H. B. M.

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
	HDM	Year
		Seq



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Schedule O - Involuntion Certificate

A) DONOR INSEMINATION SECTION

1. DOCUMENT CODE: [][][][] 2. BREED CODE: * [A][A][N] 3. PARTICIPANT NUMBER - OWNER OF DONOR FEMALE: * [0][7][0][0][6][4][2]

4. PARTICIPANT NAME - OWNER OF DONOR FEMALE: [W][I][N][D][M][E][U][L][][A][N][G][U][S][][S][T][O][E][T][][][][][]

5. FULL NAME OF DONOR FEMALE: [W][I][N][D][M][E][U][L][][R][E][D][][A][N][N][Y][][1][4][0][3]-[E][T][][][][][]

6. REGISTRATION NUMBER OF DONOR FEMALE: * [0][0][8][0][0][7][4][9][5][8] OR [][][][][][][][][][][][][][][][][][][]
Breed Sex HDM Year Seq

7. IDENTIFICATION OF DONOR FEMALE: [][][][][][][][][][][][][][][][][][][]

8. LABORATORY DNA NUMBER OF DONOR FEMALE: * [2][2][1][0][2][1]-[][][][][][][][][][]

9. FULL NAME OF DONOR MALE: [S][I][E][N][E][]

10. REGISTRATION NUMBER OF DONOR MALE: * [][][][][][][][][][][][][][][][][][][] OR [][][][][][][][][][][][][][][][][][][]
Breed Sex HDM Year Seq

11. IDENTIFICATION OF DONOR MALE: [][][][][][][][][][][][][][][][][][][]

12. LABORATORY DNA NUMBER OF DONOR MALE: * [][][][][][][][][][][][][][][][][][][]

13. DATE OF INSEMINATION: * [1][3][0][8][2][0][2][1]

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:	
19. VALID FROM:	20. EXPIRY DATE:	18. NO MASTER ☐
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: *

2	0	0	8	2	0	2	1
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 25. NUMBER OF EMBRYO'S: *

0	0	7
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I HERE WITH CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND THE EMBRYOS WERE FLUSHED, PROCESSED AND MARKED CORRESPONDING TO ACT 25 OF 1977.

26. DATE: *

0	0	0	0	0	0	0	0
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 SIGNATURE OF VETERINARIAN:  RD

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	HDM	Year
			Seq