

SCHEDULE O - CALF INTERVAL

A) DONOR INSEMINATION SECTION

1.	DOCUMENT CODE	2291
2.	BREED CODE	221
3.	MEMBER NUMBER - OWNER OF DONOR	695612CIA
4.	MEMBER NAME - OWNER OF DONOR COW	MR AF GUSTAFSON
5.	FULL NAME OF DONOR COW	PRIMA CHI PRIM190004
6.	REGISTRATION OF DONOR COW	92252451
7.	IDENTIFICATION OF DONOR COW	PRIM19004
8.	LABORATORY NUMBER OF DONOR COW	
9.	FULL NAME OF DONOR BULL	PASCIA DELLA FAVORITA
10.	REGISTRATION OF DONOR BULL	80807514
11.	IDENTIFICATION OF DONOR BULL	PASCIA
12.	LABORATORY NUMBER OF DONOR BULL	293293
13.	DATE OF INSEMINATION	07 Mar 2022

B) EMBRYO FLUSHING / FREEZING SECTION

14.	FLUSHING DATE OF EMBRYO	4 Mar 2022	16.	EMBRYOS FROZEN:	0
15.	EMBRYOS TRANSFERRED:	0	17.	EMBRYOS FROZEN FOR EXPORT:	0

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

18. _____
SIGNATURE OF VETERINARIAN

C) EMBRYO TRANSFER SECTION

19.	EMBRYO TRANSFER DATE	_____
20.	MEMBER NUMBER - OWNER OF RECIPIENT COW	_____
21.	BREED DESCRIPTION - RECIPIENT COW	_____
22.	BIRTH - RECIPIENT COW	_____
23.	IDENTIFICATION - RECIPIENT CO	_____

I HEREBY CERTIFY THAT I HAVE PERFORMED THE ABOVE-MENTIONED OVUM TRANSFER WITH AN OVUM AS SPECIFIED ABOVE.

24. _____
DATE

25. _____
SIGNATURE