

## **SCHEDULE O - CALF INTERVAL**

### **A) DONOR INSEMINATION SECTION**

|     |                                  |                        |
|-----|----------------------------------|------------------------|
| 1.  | DOCUMENT CODE                    | 2291                   |
| 2.  | BREED CODE                       | 238                    |
| 3.  | MEMBER NUMBER - OWNER OF DONOR   | 490919BOR              |
| 4.  | MEMBER NAME - OWNER OF DONOR COW | B. HURWITZ FARMING     |
| 5.  | FULL NAME OF DONOR COW           | NTABA NYONI 08 015     |
| 6.  | REGISTRATION OF DONOR COW        | 68571504               |
| 7.  | IDENTIFICATION OF DONOR COW      | NBOR08015              |
| 8.  | LABORATORY NUMBER OF DONOR COW   | 54549                  |
| 9.  | FULL NAME OF DONOR BULL          | NELLO LW 922 - OLIFANT |
| 10. | REGISTRATION OF DONOR BULL       | 74543083               |
| 11. | IDENTIFICATION OF DONOR BULL     | LW09022                |
| 12. | LABORATORY NUMBER OF DONOR BULL  | U64407                 |
| 13. | DATE OF INSEMINATION             | 04 Feb 2022            |

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### **B) EMBRYO FLUSHING / FREEZING SECTION**

|     |                         |            |     |                            |   |
|-----|-------------------------|------------|-----|----------------------------|---|
| 14. | FLUSHING DATE OF EMBRYO | 1 Feb 2022 | 16. | EMBRYOS FROZEN:            | 0 |
| 15. | EMBRYOS TRANSFERRED:    | 11         | 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

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### **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