Please return to Holstein UK by post or email info@holstein-uk.org

|  |  |
| --- | --- |
| ET1 Number |  |
| Imported | Y / N |
| Flush date |  |
| Owner of embryo (name) |  |
| Prefix |  |
| Name of Donor cow |  |
| Donor cow ear tag number |  |
| Name of sire(s) |  |
| Sire(s) herd book number(s) |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Embryo No. | Code | Owner prefix | Recipient’s ear tag | Breed | Implantation date |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**Amendment codes:**

A – Thawed and Implanted If A: Enter identity of recipient cow, breed & implantation date

B – Destroyed If B: Enter date & reason for destruction

C – Transferred to New Owner If C: Enter name & address of new owner

D – Recipient Dam Transferred to New Owner If D: Enter name & address of new owner of recipient dam & date

E – Export of Embryo If E: Enter name & address of new overseas owner & date of transfer

If A or B, form to be signed by Vet / ET company If C, D or E, form to be signed by Member

I certify that the above information is correct:

Signed by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_