



Irish Angus Cattle Society Ltd.

24 HAWTHORN CRESCENT, BOYLE ROAD, CARRICK-ON-SHANNON, CO. ROSCOMMON

4026

D.I.Y. INSEMINATION CERTIFICATE

LICENCE No.: _____

1. **Name of Breeder:** _____

Insemination Date: _____

Address: _____

2. **Name of Cow:** _____

Cow Herd Book No.: _____

Breed: _____

Tag No.: _____

3. **Name of Bull:** _____

Bull Herd Book No.: _____

Code No.: _____

4. First Service:

Repeat Services:

1st

2nd

3rd

5. I certify that I identified the above cow by Tattoo No.: _____

Name of Inseminator: _____

Signature: _____

PART 2:

TO BE COMPLETED BEFORE DISPATCH TO BREED SOCIETY

This document must accompany the birth notification form of the calf on submission to the Society.

1. The semen was purchased/obtained from (Name of Organisation) _____

2. I hereby certify the above cow's identification is correct and state that the cow was not served by any other bull during the heat period in which this insemination was carried out. Neither has the cow been served naturally nor artificially inseminated since the date of this certificate.

I certify that the above details are true and correct

Member's Signature: _____

Date: _____