

A

No. **8011**

IRISH ANGUS CATTLE SOCIETY LTD.
24 Hawthorn Crescent, Boyle Road, Carrick-on-Shannon, Co. Roscommon

SERVICE CERTIFICATE

TO BE COMPLETED IF THE BULL IS NOT OWNED BY THE OWNER OF THE FEMALE

THIS COLUMN FOR OFFICE USE

NAME OF FEMALE

TATTOO

NAME AND ADDRESS OF REGISTERED OWNER OF FEMALE

NAME OF BULL

TATTOO

NAME AND ADDRESS OF REGISTERED OWNER OF BULL

1. If the Female was running with the Bull, give first and last date.

FROM

TO

or

2. Complete date of Service if actual date is known.

DATE OF SERVICE

FORM A To be sent to the Society with the completed calf notification form.

FORM B To be kept by the owner of the Female.

FORM C To be kept by the owner of the Bull.

_____ If the Female returns to Service, a new form is required.

_____ If the Female is sold – Part B should be given to the new owner.

I HEREBY CERTIFY THAT THE ABOVE DETAILS ARE TRUE AND CORRECT

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SIGNED (owner of bull)

DATE