The Carcase Breed
LIMOUSIN

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FORM ET2
IMPLANT OF FROZEN EMBRYOS

If details of the flush which produced these embryos have not been reported to ALBS, please attach a completed ET1 form for the flush.

BREEDER NAME _____ HERD ID _____

DONOR DAM NAME _____ IDENT _____

SIRE OF EMBRYOS _____ IDENT _____

FLUSH NUMBER _____ FLUSH DATE _____

NUMBER IMPLANTED _____ IMPLANT DATE _____

EMBRYO NO.	RECIPIENT EAR TAG eg., Y54	RECIPIENT IDENTIFICATION (Herd/Grade/Yr/Tag) eg., ABC 0 Y54	RECIP. BREED CODE	RECIP. YEAR OF BIRTH

Name of Practitioner _____

I certify that all information as shown above, is correct;

Member's Name (please print) _____ Herd Id. _____

Member's Signature _____ Date _____

This form, completed in detail, to be forwarded to ALBS within 120 days of implantation.