LIMOUSIN

Carcase, Yield, Efficiency.

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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 complete an ET1 form for the flush.

BREEDER NAME _____ HERD ID _____

DONOR DAM NAME _____ IDENT _____

SIRE OF EMBRYOS _____ IDENT _____

FLUSH NUMBER _____ FLUSH DATE _____

CANE NUMBER_____

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

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.