



Sale of Embryo

To be used to register calves resulting from purchased embryos— no lease required
and/or

To be used for co owned donor dams— no lease required

DONOR DAM _____ **REG#** _____

SERVICE SIRE _____ **REG#** _____

Date of Service _____
Day Month Year

Type of Service _____ If Natural Service _____
AI Natural Signature of Owner of Natural Service Sire

Date of Embryo Recovery _____
Day Month Year

Collected in: _____ Canada _____ Other Country

I/WE THE OWNER(S) of the above stated donor dam at time of conception, sell _____ Embryo(s) to:

NAME _____

DATE _____
Day Month Year

ADDRESS _____
(Give complete address of buyer)

PHONE# _____

(Town/City) (Prov) (Postal Code)

EMAIL _____

SIGNATURE(S) _____
(ALL Owner(s) of Donor Dam-at time of breeding-must sign) (ALL Owner(s) of Donor Dam-at time of breeding-must sign)

EMBRYO REPORT(S) COMPLETED BY THE TECHNICIAN PERFORMING THE EMBRYO RECOVERY/TRANSFER MUST BE RETAINED FOR
YOUR RECORDS AND MAY BE REQUESTED AT ANYTIME