

P.O. Box 4430 • Fort Worth, Texas 76164 • (817) 625-6241 Fax (817) 625-1388 • E-Mail: tibaa@tlbaa.org • www.tlbaa.org	TLBAA No P.H. No Location of P.H. No DNA Case No NAME OF OWNER OF COW MEMBERSHIP NO.
A.I. BREEDING CERTIFICATE	ADDRESS
I hereby certify the following facts to be true and correct concerning the: Artificial Insemination	REGISTERED NAME OF CERTIFIED SIRE TLBAA NoA.I. NoP.H. No
1REGISTERED NAME OF COW	4. Date of Embryo transfer; Mo DayYr
TLBAA No P.H. No Location of P.H. No Location of Brand	NAME OF TRANSFER TECHNICIAN
	ADDRESS OF TRANSFER TECHNICIAN
REGISTERED NAME OF CERTIFIED SIRE TLBAA No.	SIGNATURE OF TRANSFER TECHNICIAN
Date of Insemination: Mo Day Yr	5. If Embryo Transfer is a result of natural service, please complete the following:
33,	REGISTERED NAME OF SIRE
NAME OF INSEMINATOR	TLBAA No P.H. No Location of P.H. No
ADDRESS OF INSEMINATOR	DNA Case No.
SIGNATURE OF INSEMINATOR	NAME OF OWNER OF SIRE MEMBERSHIP NO.
WHITE - OFFICE COPY YELLOW - BREEDER COPY PINK - NEW OWNER COPY	ADDRESS OF OWNER OF SIRE
	SIGNATURE OF OWNER OF SIRE

EMBRYO TRANSFER CERTIFICATE

REGISTERED NAME OF COW

For rules regarding Artificial Insemination and Embryo Transfers, please refer to Section 7 of your TLBAA Handbook. 02/06