Valais Blacknose International Sheep Breeders Association & Registry

ARTIFICIAL INSEMINATION DECLARATION

Phone: 785-456-8500 • PO Box 231, Wamego, KS 66547 • Fax: 785-456-8599 • asregistry@gmail.com I hereby certify that the following ewes:

Flock Prefix:	Flock Tag #:		VBISBAR #			
Flock Prefix:	Flock Tag #:		VBISBAR #			
Flock Prefix:	Flock Tag #:		VBISBAR #			
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Flock Prefix:	Flock Tag #:		VBISBAR #			
I cert	tify that the (# of ewes) ewes listed	above w	ere artificial	ly inser	ninated with	
semen from						
(Name & Tag # of Ram) Printed Name: (Licensed Veterial)	(VBISBAR Registration # of Ram) narian/Technician)		Dat	'e: (M/D/Y)		
Cianatana	narian/Technician)		_ Date:	/	/	
	e ewes, certify that all the inforn	nation h	ovoin is timal	v & 000	urata •	
Owner of ewes at time of insemination	•					
Lessee of ewes at time of insemination	on:(Signature)		Date:	/	/	

• THIS COMPLETED FORM MUST ACCOMPANY ANY REGISTRATION APPLICATIONS IF THE CONCEPTION WAS AI •