

(print on landscape format)

Stallion's name: _____ Reg. No.: _____ Breeding Season: _____ Page: _____

Stallion owner (name + address): _____

<i>Mare's name</i>	<i>Reg. No.</i>	<i>Owners name and complete address</i>	<i>Breeding or shipping dates</i>	<i>In foal</i>	<i>Code</i>
				yes	
				no	
				yes	
				no	
				yes	
				no	
				yes	
				no	
				yes	
				no	
				yes	
				no	
				yes	
				no	
				yes	
				no	
				yes	
				no	

Codes: IS = Insemination with Fresh Semen NS = Natural Service TS = Transported Cooled Semen FS = Frozen Semen **In foal:** pls. mark: YES or NO

_____ The stallion did not breed any mares. Please, also return the signed form, if there were no breedings.

CERTIFICATION : I do hereby certify that the above information is true and correct. **Owner/Agent:** _____ **Date:** _____

Return before DECEMBER 31st to: ISR/Oldenburg N.A., 517 DeKalb Ave, Sycamore, IL 60178