CANADIAN LIVESTOCK RECORDS CORPORATION
2417 Holly Lane, Ottawa, Canada K1V 0M7

Canadian South Devon Association

Incorporated under the Animal Pedigree Act at the Department of Agriculture, Ottawa, Canada

NAME OF ANIMAL Not more than 30 letters (including spaces)	LEAVE BLANK

Body colour: Markings:

CHECK		SEX	SEX OF TWIN		TATTOO		BIRTH DATE		
Polled		M	M	%	Right Ear	Left Ear	Day	Month	Year
Horned									
Scurred		F	F						

BRED BY _____ ADDRESS _____ ID NO. _____
(Fill in name and address of owner of dam at the time she was served to produce this calf)

CALVED THE PROPERTY OF _____ ADDRESS _____ ID NO. _____

SIRE(name) _____ REGISTRATION NO. _____

DAM (name) _____ REGISTRATION NO. _____ BREED _____

I declare that the information herein is to the best of knowledge and belief true.

_____ 19_____
Date

X _____
Owner of animal at time of birth or importer sign above.
PRINT OR TYPE ALL INFORMATION, EXCEPT SIGNATURES.

FEES
For Office Use Only

BIRTH WEIGHT LBS.	WEANING WEIGHT (1) LBS.	DATE WEIGHED	DATE OF BIRTH OF DAM	FOR OFFICE USE: Adj. 200 day weight
PERFORMANCE RECORD	365 DAY WEIGHT (2) LBS.	DATE WEIGHED	A.D.G. 200 days A.D.G. 365 days	Adj. 365 day weight

COMPLETE THIS REPORT OR ATTACH REPORT OF SERVICE

ARTIFICIAL INSEMINATION

	DATE Day, Month, Year	SIRE Name	Reg. No.	Breed
Last Service				
Previous Service				

SOURCE OF SEMEN _____

WAS THE HEREIN NAMED FEMALE EXPOSED TO ANY OTHER BULL(S) AFTER LAST INSEMINATION? _____

IF SO, WHAT BREED(S)? _____

NATURAL SERVICE

PLEASE REPORT ALL SERVICES OR EXPOSURES

SIRE _____ REG. NO. _____ DATE OF SERVICE _____

_____ _____ _____ OR EXPOSED FROM _____ _____ _____ TO _____ _____ _____
Day Month Year Day Month Year Day Month Year

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS IN ACCORDANCE WITH MY PRIVATE BREEDING RECORD AND IS TO THE BEST OF MY KNOWLEDGE AND BELIEF TRUE.

Date _____ X _____
Signature of owner of sire at time of service, or inseminator.

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