

CERTIFICATE NO. \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

**AETA BOVINE EMBRYO CERTIFICATE FOR JAPAN**

**PART I – COLLECTION INFORMATION**

Country of Export: United States of America

Embryos were collected and processed by:

Accredited Veterinarian Collecting/Processing Embryos:

**State of  
Accreditation**

**Accreditation  
Number**

**A. Name:** \_\_\_\_\_

**B. Title:** Veterinarian

**C. Address:** \_\_\_\_\_

**D. City, State, Country, Zip:** \_\_\_\_\_

**E. Signature:** \_\_\_\_\_

Collection Facility:

**A. Name:** \_\_\_\_\_

**IETS Freeze Code:** \_\_\_\_\_

**B. Address:** \_\_\_\_\_

**C. City, State, Country, Zip:** \_\_\_\_\_

Embryo collection and processing were performed according to requirements for export to Japan: Yes

Method of embryo collecting and processing/thawing recommendations: \_\_\_\_\_

**Cane Number:** \_\_\_\_\_

**Straw number** included from this donor mating in this shipment: \_\_\_\_\_

**Embryo identification on straw:**

1. **IETS Code:** \_\_\_\_\_

2. **Breed:** \_\_\_\_\_

3. **Donor Registration Number:** \_\_\_\_\_

4. **Sire Registration Number:** \_\_\_\_\_

5. **Date of Collection:** \_\_\_\_\_

**PART II – GENETIC INFORMATION**

**Donor Female: Breed:** \_\_\_\_\_

**Breed Association:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Name of Donor:** \_\_\_\_\_

**Registration Number:** \_\_\_\_\_

**Owner of Donor:** \_\_\_\_\_

**Address of Owner:** \_\_\_\_\_

Any known genetic defects or reproductive disorders as reported by Herdbook or Breed Association, as referred to in the official protocol, Section 3, Part (3). \_\_\_\_\_

**Date of Donor Insemination:** \_\_\_\_\_

**Donor Service Sire: Breed:** \_\_\_\_\_

**Breed Association:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Name of Service Sire:** \_\_\_\_\_

**ID Code:** \_\_\_\_\_

**Registration Number:** \_\_\_\_\_

**NAAB Grade of Sire:** \_\_\_\_\_

Semen used for this mating qualifies for export to Japan: Yes

Any known genetic defects or reproductive disorders as reported by Herdbook or Breed Association, as referred to in the official protocol, Section 3, Part (2), (i) and (ii). \_\_\_\_\_

**Accredited Veterinarian Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Country, Zip:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

The above information is certified as confirmed and/or as believed trustworthy as provided for in Japanese law improvement and Increased Production of Livestock (Law No. 209 enacted in 1950).

Signed: \_\_\_\_\_

Morgan Montgomery, Certificate Administrator  
American Embryo Transfer Association  
1800 South Oak Street, Suite 100  
Champaign, Illinois 61820 USA