



Artificial Insemination Form American Dexter Cattle Association

Cow/Heifer _____ Reg No _____

Sire Name _____ Reg No. _____

Date of Service ____/____/____

(Signatures) Owner _____ AI Technician. _____

Owners Address _____

City _____ State _____ Zip _____

Cow/Heifer _____ Reg No _____

Sire Name _____ Reg No. _____

Date of Service ____/____/____

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