

Insemination Verification ~ Lexington

This is intended to verify that the mare _____ (mare name)
_____ (description) was inseminated on
_____ (date) by a federally accredited veterinarian.

If a second dose was sent, was it also used? ___ yes ___ no
If the second dose was not used, was it disposed of? ___ yes ___ no (Shipped semen
is only for the above mentioned mare, under no circumstances are any other mares to be
inseminated from this shipment.)

Name of Veterinarian:

Address & Telephone # of Veterinarian:

Signature of Federally Accredited Veterinarian:

Signature of Mare Owner:

**** This Insemination Verification form, with original signatures,
must be returned to Gigha Steinman within 15 days of receipt of each
shipment of semen, in agreement with the Breeding Contract ****

Please return to: Gigha Steinman / River Oaks Farm LLC,
P.O. Box 1165, Bronson, FL 32621.
Any questions? (386) 717-0852
www.RiverOaksFarm.net