| FROM TO SWEDEN  |
|---|
| This is to certify that I on (day/month/year):packed semen  |
| from the dog (breed/name/registration number):  |
| owned by (name/address):  |
| The dog was at the time of semen collection identified by:  |
| ID-tattoo nomicrochip noa signed enclosed photo or nose-print □.  |
| ☐ A blood sample was drawn on (day/month/year)which is at least 20 but not more                                 |
| that 30 days after semen collection and the test result shows that the dog above was free from                  |
| brucellosis. The test result where the identity of the dog is stated is attached.                               |
| $\square$ A blood sample was drawn on (day/month/year) which is at least 20 but not more                        |
| that 30 days after semen collection and test reslut shows that the above dog was free from                      |
| leptospirosis. The test result where the identity of the dog is stated is attached.                             |
| or  |
| $\square$ A clearly legible copy of a leptospirosis vaccination certificate showing that the dog at the time of |
| semen collection was marked with an identity number (michroship or tattoo) and protected by a                   |
| valid leptospirosis vaccination (a vaccination no more than 365 days old) is attached.                          |
| The shipment consists of:   |
| a) (no.) of medium (or mini) straws of semen  |
| b) (no.) of vials with pelletted semen  |
| c) (no.) of vials containing thaw medium  |
| The semen tube/straws/vials are marked (Breed / Name / Reg.no / Date / Place):                                  |
| •••••••••••••••••••••••••••••••••••••••   |
| I closed the shipment with a seal wearing the number  |
| Date (day/month/year):  |
| Signature of veterinarian   |
| Printed name:   |
| Address:  |
| Phone:Fax:  |

VETERINARY HEALTH CERTIFICATE FOR EXPORT OF DOG SEMEN

## CERTIFICATE OF COLLECTION OF DOG SEMEN

|   | KC Reg.no:   |
|---|--|
|   |  |
| VETERINARY CERTIFICATE  |  |
| I hereby certify that the dog describe  | ed above was presented for semen collection on(date)   |
| From the collection resulted  | a) medium (0.5 ml) straws  |
| or  | b) ml of fresh semen   |
| The semen can be identified as follo  | ws [breed, name (may be abbreviated), KC reg.no., date and place   |
| of collection]:   |  |
|   |  |
| Colour of straws/plug:  |  |
| Type of extender/cryoprotective:  |  |
| Recommended thawing procedure:  |  |
|   |  |
| Recommended number of straws per  | artificial insemination:   |
| Semen quality (if frozen, state post-tha  | w quality): Excellent $\square$ Good $\square$ Acceptable $\square$ Sub-standard $\square$                         |
| Total number of spermatozoa:  | Motility:%   |
| Number of spermatozoa/straw or v  | ial:   |
|   | ne semen donor was clinically examined and was found free<br>two normal testicles, fully descended in the scrotum. |
| Signature of veterinarian:  |  |
| Printed name:   |  |
| Address   |  |
| Phone:  | Fax:   |
| <b>Declaration by stud owner</b> I hereby certify that the above dog, that it rightfully belongs to me. | from which semen has been collected, is the alleged dog, and   |
| Signature of owner:   |  |
| _   |  |
| Address:  |  |
| Dhono   | Eov.   |