



# Cover slip and cover money receipt

**Year:** \_\_\_\_\_

**Friesenpferde-Zuchtverband e.V.**

Mühlental 76  
56077 Koblenz

Breeding station:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E-Mail: info@fpzv-ev.de  
Tel. 0 26 1 / 91 46 43 00  
Fax: 0 26 1 / 91 46 43 02

Register No.: \_\_\_\_\_

Current number of covering): \_\_\_\_\_

Mare:	UELN:
Sire of the mare:	UELN:
Mother of the mare:	UELN:
Owner: (Name and address)	

was  covered  inseminated with fresh semen  inseminated with frozen semen  covered in herd

Embryotransfer - Name of surrogate mare: \_\_\_\_\_ UELN: \_\_\_\_\_

Name of sire:	UELN:
Covering date:	Last covering date:

Moreover  covered  inseminated with fresh semen  inseminated with frozen semen  covered in herd

Embryotransfer - Name of surrogate mare: \_\_\_\_\_ UELN: \_\_\_\_\_

Name of sire:	UELN:
Covering date:	Last covering date:

The breeding fee was  paid  not paid

Place and date of issuing

Signature of owner of Sire / Vet / Breeding station

From covering above a foal has been born at _____ in _____ .	
<input type="checkbox"/> Female / <input type="checkbox"/> male	<input type="checkbox"/> the mare was not in foal <input type="checkbox"/> had lost the offspring
Name of the foal: _____	
Place and date of issuing	Signature of the breeder

This paper must be kept with care and sent in original form by the breeder to the supervising association within four weeks after birth. One copy remains with the breeder, another remains with the stallion owner / insemination station.