

PURE BREED REGISTRATION

NAME: ADDRESS: PHONE: ()	INSPECTION OF THE PROPERTY OF	ON FORM	POST TO: Stuart Albrey Pure Breeds Registrar 176 Campbells Road RD9 Waimate 7979 Or EMAIL TO: registeredbreeds@colouredsheep.o	
BREED: FLOCK PREFIX: FLOCK NUMBER: NUMBER OF SHEEP TO	BE INSPECTED:	INSPECTION Ewes:	ON DATE:	ns:	
EAR TAG NUMBERS OF	SHEEP PASSED FOR	R REGISTRATIO	N - Ewes:	T	
EAR TAG NUMBERS OF	SHEEP PASSED FOR	R REGISTRATIO	N - Rams:		
TOTAL:	•				
INSPECTOR'S DECLARATE I have inspected the sheep ar				numbers of those sheep pas	sed for registration.
INSPECTOR'S, PLEASE SNAME:	SUPPLY:		NAME:		
ADDRESS:			ADDRESS:		
# SHEEP INSPECTED: # SHEEP PASSED: KILOMETRES:			# SHEEP INSPI # SHEEP PASS KILOMETRES	ED:	

COMPLETED FORMS TO BE RETURNED TO THE REGISTRAR

Ear Tag numbers of sheep NOT passed Inspection: