

## Annexure VI

### Annual/Half yearly reporting format for ART Service Provider be submitted to Maharashtra Bovine Breeding Authority, Pune

1. Name of ART Service Provider:
2. Registration No.:
3. Qualification:
4. Contact Number:
5. Email ID:
6. District & Address:
7. Period of reporting:
8. Type of ART Services rendered:
9. No. of ART expert engaged with name and Registration No.:

Sr. No.	Name of ART Expert	Qualification	Date since working under institute	Remark

#### 10. Work done report

Sr. No.	No. of MOET Cycle done	No. of OPU done	No. of Embryo Produced	No. of Embryo Frozen	No. of Embryo Purchased	No of Embryo Transfer done			No. of IVF Pregnancy confirmed	Conception rate	No. of IVF calf borne
						Fresh	Frozen	Total			

#### 11. Sale

Sr. No.	Institute details of embryo production	No. of Embryo	Details of Embryo ID

#### 12. Purchase

Sr. No.	Institute details of embryo production	MAHABBRA Reg. no. of Institute	No. of embryo purchased	Details of embryo Id

#### 13. Beneficiary Details

No. of dairy farmers benefited by this technology	No. of NGO/ Goshala Benefited by this technology

14. Donor/sire used for embryo production are above CMU norms of GOI: Yes/ No  
(If yes attached sheet details of Pedigree of donor and sire used for embryo production)

Date:

Name, designation and signature of the person