

# Laboratory Certification of Cloning Procedure

**Australian Continental Equestrian Group Inc.**  
**(ACE Group Inc.)**  
Laboratory Certification of Cloning Procedure  
Version 1.0



---

---

## SECTION 1 – CLONE HORSE DETAILS

Registered / Proposed Name of Clone Horse:

---

---

Date of Birth:

---

---

Sex:

---

---

Colour:

---

---

Microchip Number:

---

---

Country of Birth:

---

---

---

---

## SECTION 2 – DONOR HORSE DETAILS

Name of Donor Horse:

---

---

Registration Number:

---

---

Breed / Studbook:

---

---

Date of Birth:

---

---

Sex:

---

---

Owner of Donor Horse:

---

---

### SECTION 3 – CLONING LABORATORY DETAILS

Name of Laboratory:

---

---

Address:

---

---

Country:

---

---

Telephone:

---

---

Email:

---

---

Laboratory Accreditation / Licence Number (if applicable):

---

---

### SECTION 4 – CLONING PROCEDURE INFORMATION

1. Type of cloning procedure utilised:

Somatic Cell Nuclear Transfer (SCNT)

Other (please specify):

---

---

2. Date tissue sample collected from donor horse:

---

---

3. Type of tissue/cell sample collected:

---

---

4. Was donor identity verified prior to cloning?

Yes  No

If yes, method of verification:

---

---

5. Date embryo created:

---

---

6. Date embryo transfer performed:

---

---

7. Number of embryos transferred:

---

---

---

---

## SECTION 5 – SURROGATE MARE DETAILS

Name / Identification of Surrogate Mare:

---

---

Microchip / Registration Number:

---

---

Breed:

---

---

Owner of Surrogate Mare:

---

---

Country where pregnancy carried:

---

---

---

---

## SECTION 6 – DNA VERIFICATION

1. Was DNA testing performed on the clone horse?

Yes  No

2. Was the DNA profile compared to the donor horse?

Yes  No

3. Name of testing laboratory:

---

---

4. Reference / Case Number:

---

---

5. Result of comparison:

- DNA profile consistent with donor horse
  - DNA profile not consistent with donor horse
  - See attached report
- 
- 

## SECTION 7 – DECLARATION BY LABORATORY

I hereby certify that:

1. The information contained within this document is true and correct to the best of my knowledge;
2. The horse identified in this certificate was produced through the cloning procedure described above;
3. Reasonable procedures were followed to verify the identity of the donor horse;
4. The cloning procedure was conducted by appropriately qualified personnel;
5. Any attached DNA reports and supporting documents relate to the horse identified in this certificate.

Name of Authorised Laboratory Representative:

---

---

Position / Title:

---

---

Qualifications:

---

---

Signature:

---

---

Date:

---

---

Official Laboratory Stamp / Seal:

---

---



# ACE

# AUSTRALIAN CONTINENTAL EQUESTRIAN GROUP INC.

## Embryo Transfer Clone Record - Mare Identification Certificate

### Description of Donor Mare (Diagram 1)

Name

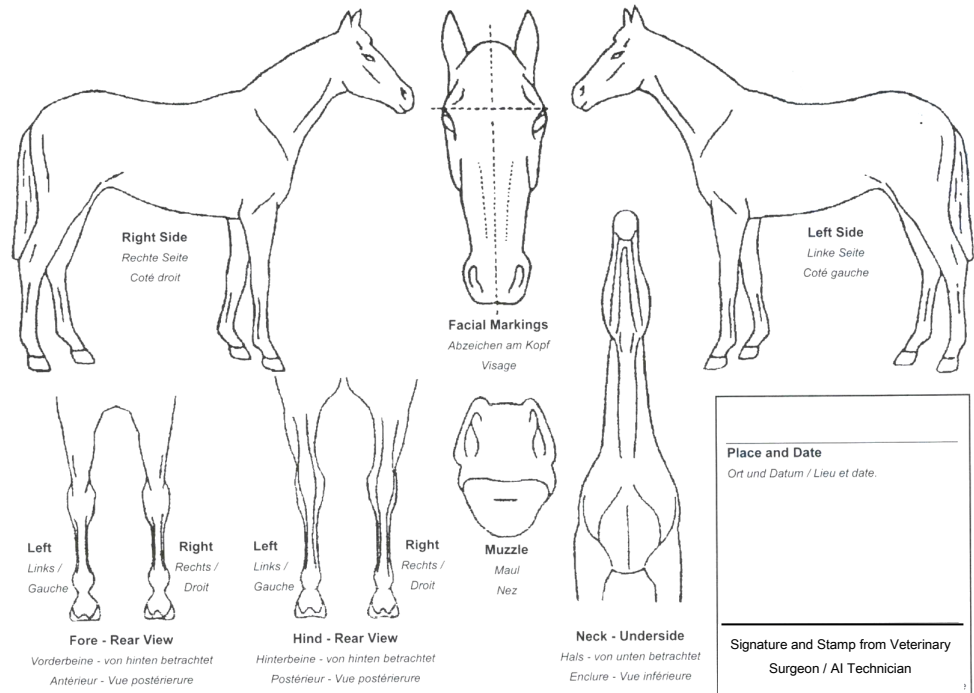
\_\_\_\_\_

Registration Number

\_\_\_\_\_

Microchip Number

\_\_\_\_\_



### Description of Recipient Mare (Diagram 2)

Name

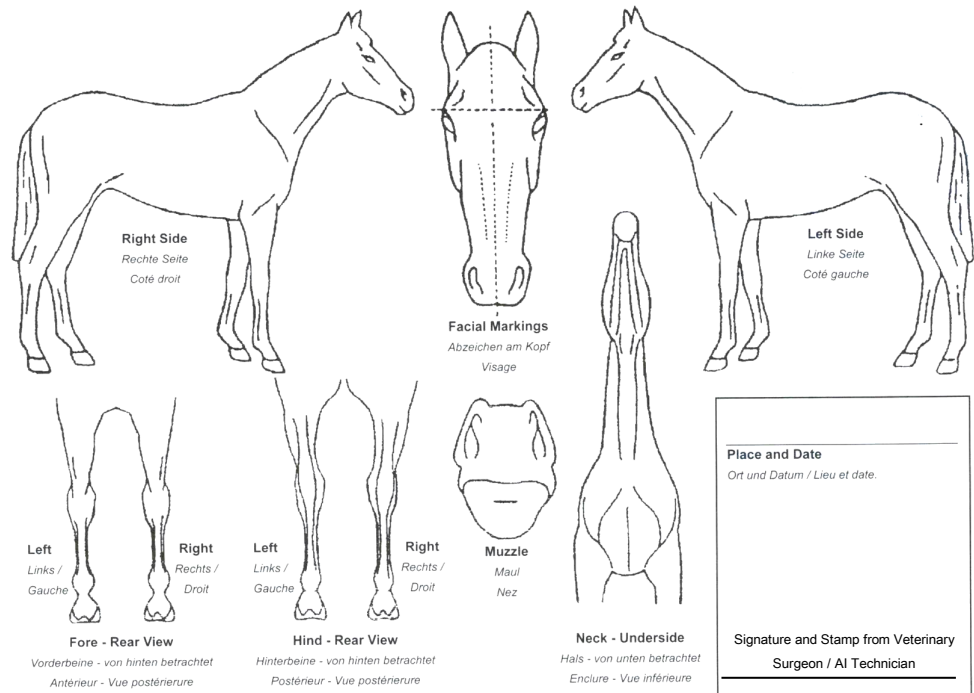
\_\_\_\_\_

Registration Number

\_\_\_\_\_

Microchip Number

\_\_\_\_\_



Please ensure the markings of both mares enable a positive identification of the animal in future. White markings must be shown in red. If there are no markings, this fact must be stated. All head and neck whorls should be marked with a black x. Other whorls should be similarly recorded in grey in animals lacking sufficient other distinguishing marks. Acquired marks and other distinguishing marks, e.g. prophet's thumb mark, etc should always be noted. Please include brands and note the microchip number and mark the location with an arrow.

THE AUSTRALIAN CONTINENTAL EQUESTRIAN GROUP INC.

ARBN: 610 022 065 / ABN: 67 826 873 846

PO Box 224, Canungra QLD 4275

office@acegroupinc.com.au

www.acegroupinc.com.au

## SECTION 8 – FOR REGISTRY USE ONLY

Date Received:

---

---

Reviewed By:

---

---

Additional Information Required:

---

---

Registration Approved:

Yes  No

Registration Number Issued:

---

---