

Dr Josephine Dandrieux, BVM&S, cert VC, MRCVS

HEART CERTIFICATE

DETAILS OF DOG: (Block capitals please)

ANKC REGISTERED NAME_VONEIFFEL CIRCLE OF LIFE____ANKC REGN. NO: _5100043909

DATE OF BIRTH: __14_/_12_/_2006___ GENDER: __F__ COLOUR: _Black and Tan _____MICROCHIP/TATOO NO: 978000001097811

OWNER'S NAME:_Susan Bosenburg_____ OWNER'S ADDRESS: ____PO BOX 1712 GERALDTON 6513_____

VETERINARY OPINION

I certify that at the time of my examination:

Please tick box as appropriate and delete the other box and details by drawing a line through it:

 \checkmark

I was UNABLE TO AUSCULTATE any heart murmur

I AUSCULTATED A MURMUR, the grade being _____ on a scale of 6

| Vet's signature | Print Name: Dr Josephine Dandrieux_ Date12_/04_/_2010 |
|-----------------|---|
| | |

Address: ____Murdoch University Veterinary Hospital ___Tel No: ____1300 652 494_____

ANNUAL TESTING IS ESSENTIAL FOR BREEDER USE AND RESEARCH PURPOSES