

National Police Canine Association
Master Certification Sheet

Certification # _____

Contraband

DATE: _____

LOCATION: _____

	Handler	K-9	Department & State	Veh/Int	LOCATION:			ADD#1	ADD#2	ADD #3	PAID
				P/F	CO #	P/F	CO #	P/F	CO #	P/F	
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											

	FIND	Amount
VEH	#1	
	#2	
	#3	
INT	#1	
	#2	
	#3	
ADD	#1	
	#2	
	#3	
	#4	
	#5	

Certifying Official & #

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