o: British Veterinary Association Mansfield Street, London W1G 9NQ Telephone: 020 7908 6380	9-18	8131	THE ORIGINAL OF THIS CERTIFICATE IS GREEN
ection A – to be completed by owner/agent	KC Re	gistered Number	UNREGISTERED
C Registered Name CHARLIE			
Breed AUTRALIAN LASCADODLE	*********	Sex MALE	Date of bi
lame of owner	Teratoping/	Address	
,			and the state of t
Sire:		Dam:	
hereby declare that (NB: DELETION OF ANY OF	THESE ITEMS	INVALIDATES T	HIS CERTIFICATE)
 The particulars above are correct and relate to This dog is a minimum of one year old and ha 	the dog subm	itted for radiograp	phic examination
 I give permission for a copy of the certificate to 	o be sent to the	geneticist retain	ed by the breed society or other representative bor
I give permission for the results of the examinate I give permission for the results to be publisher.	adon to be used and included	on the relevant h	C documents
Owner's/Agent's signature		Family 1 = 0 1 4 1 1 1 1 1 1 1 1	Date 10 107 120
Section B - TO BE COMPLETED BY SUBMITTING VETE	ERINARY SURGEO	N	
Section A must be completed in full before comple			
Microchip/ Tattoo no.	2	8930	7 Microchip/ Tettos confirmed
			10. 12. 2019
certify that the radiograph relating to the dog ident	tified above wa	s taken on the fo	llowing date 10 / 07 / 2019
certify that the radiograph relating to the dog ident ind in conformity with the provisions of the Hip Dys reterinary surgeon submitting radiograph (BLOCK)	spiasia Scheme	s taken on the fo Procedure Note	llowing date 10 1 07 1 2019
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eterinary surgeon's Signature Please submit the correct fee for the radiograph Ection C - TO BE COMPLETED BY SCRUTINEERS CE	CAPITAL S) aph to be proce	ssed (cheques p	F/MRCVS Date (Q / OF 120/5) ayable to BVA) For current fees contact BVA
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