

ANIMAL HEALTH TRUST

Litter Screening Certificate for Congenital Hereditary Eye Defects

Owner's name MRS A GILLESPIE
 Address DETANIA
MAIN ROAD KESALE
SAXMUNDHAM SUFFOLK

Breed BORDER COLLIE
 Date of birth 28 MAY 2009
 Number born in litter 7
 KC/ISDS Reg Name & No of sire BORDETIME ROBERT THE BRUCE FOR DETANIA
 KC/ISDS Reg Name & No of dam DETANIA FLORABELLE AGAIN

I declare the dog(s) submitted for litter screening is/are the one(s) described below. I agree that the information may be made available for research purposes and may be published.

Date: 14-7-09

Signed Angela R. Gillespie

Dog	Identification	Sex	Colour	CEA		RD		Cataract	
				Pass	Fail	Pass	Fail	Pass	Fail
1	958000001505700	D	BLACK/WHITE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
② 2	" 1469019	D	BLACK/WHITE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	" 1444729	D	BLACK/WHITE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	" 1538977	D	RED/WHITE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	" 1533917	D	RED MERLE/WHITE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	" 1486146	D	RED MERLE/WHITE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	" 1441764	B	RED MERLE/WHITE	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments

Name Baron
 Signed Baron Date: 14/7/09