



OFFICIAL OBEDIENCE TRIAL REPORT

EVENT DATE 12-2-12 CLUB ID _____ TRIAL 1 2CLUB NAME (Do not abbreviate) Trained n Talented CaninesCITY Newville STATE PA

Licensed Classes	Number of Pre-Entries	<u>9</u>
	Number of Day-Of-Show entries (N/A for pre-entry only events)	
	Grand Total	<u>9</u>

Time Trial Started 8:30
Time Trial Completed 10:00

1. Recording Fee Amount. The recording fee of \$1.50 per entry must accompany the Official Report, except for the classes of Groups, Best In Show, Best in Multi-Breed Show, Special Exhibition and Total Dog.
2. One copy of this report and all related paperwork must be received by UKC within ten (10) business days of the event, or fines will be assessed in accordance with the current rulebook.

Please answer the following:

1. Were the advertised Judges used? yes no; Explain _____
 - a. Were all changes approved by UKC? yes no; Explain _____
 - b. Was there adequate communication to the exhibitors of any change, with a listing of the replacement Judge(s)? yes no
2. Was the advertised Event Chairperson used? yes no; Explain _____
 Was the advertised Event Secretary used? yes no; Explain _____
 Were all changes approved by UKC? yes no; Explain _____
3. Were any complaints filed? yes no ALL MISCONDUCT REPORT AND HEARING FORMS MUST ACCOMPANY THIS REPORT.
4. Were any Disqualified for Attacking forms filed? yes no
5. Was there a veterinarian on call? yes no

The individuals signing below certify that the information contained in this report is true and accurate.**EVENT CHAIRPERSON**
 Name Juan Wert
 Address 105 S Orange St
 City Carlisle State PA Zip Code 17013
 Phone (717) 258-3877
 E-mail jew6482@centurylink.net
 My signature confirms that I was in attendance during all hours of the event.
 X Juan Wert
 Signature of Event Chairperson
EVENT SECRETARY
 Name Suzanne White
 Address 101 E Pine St
 City Mt Holly Springs State PA Zip Code 17065
 Phone 717 486 4265
 E-mail SuzanneWhite@netscape.net
 My signature confirms that I was in attendance during all hours of the event.
 X Suzanne White
 Signature of Event Secretary
HIGH IN TRIAL
 Class Shown In Nov B
 Armband # 101 Score 198.5 Dog's Name Stripers Little Guy Kai
 UKC # 16110-864 Breed Mini pdl
HIGH COMBINED
 Class Shown In Utility B Open B
 Armband # 205N Score 389.5 Dog's Name Dakota Von Eichelhaft
 UKC # P517-215 Breed German Shepherd Dog
HIGH SCORING TOTAL JUNIOR
 Class Shown In _____
 Armband # _____ Score _____ Dog's Name _____
 UKC # _____ Breed _____
 JR # _____
Does the club's obedience equipment meet the current UKC rules and regulations? Yes No

If "No" please list the piece(s) of equipment and explain the problem(s)

Judge's Signature [Signature]

Top copy to be mailed to: Attn: Dog Events Dept
 United Kennel Club, 100 E Kilgore Rd, Kalamazoo MI 49002-5584
 (269) 343-9020 • www.ukcdogs.com
 Bottom copy to be retained by the club for a period of one year.

FOR UKC USE ONLY
 Date Received _____
 Bookkeeping _____ By _____
 Processed _____ By _____