



OFFICIAL RALLY OBEDIENCE TRIAL REPORT

EVENT DATE December 5, 2015 TRIAL 1 2 (Only indicate if more than one Trial per day)

CLUB NAME Trained N' Talented Canines
(Do not abbreviate)

CLUB ID PA0090

CITY Newville

STATE PA

| | | |
|-------------------------|--|-----------|
| Licensed Classes | Number of Pre-Entries | <u>21</u> |
| | Number of Day-Of-Show Entries (N/A for pre-entry only events) | <u>1</u> |
| | Grand Total | <u>22</u> |

Time Trial Started 5:30
Conclusion of Last Class 7:10

- Recording Fee Amount.** The recording fee of \$2 per entry must accompany the Official Report, except for the classes of Special Exhibition and Total Dog.
- 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:

- Were the advertised Judges used? yes no
Were all changes approved by UKC? yes no; Explain _____
- Was the advertised Event Chairperson used? yes no
Was the advertised Event Secretary used? yes no
Were all changes approved by UKC? yes no; Explain _____

3. Were any Disqualified for Attacking forms/Misconducts filed? yes* no

*IF YES ALL MISCONDUCT REPORT AND HEARING FORMS MUST ACCOMPANY THIS REPORT.

The individuals signing below certify that the information contained in this report is true and accurate.

EVENT CHAIRPERSON

Name Joan Wert
Address Orange St
City Carlisle, State PA Zip Code 17013
Phone (717) 258-3072
E-mail jew6482@centurylink.net

My signature confirms that I was in attendance during all hours of the event.

X Joan Wert
Signature of Event Chairperson

EVENT SECRETARY

Name Steve Blair
Address 101 E. Pine St
City Mt Holly Springs State PA Zip Code 17065
Phone 717-486-4265
E-mail sbliar01@yahoo.com

My signature confirms that I was in attendance during all hours of the event.

X Steve Blair
Signature of Event Secretary

HIGH IN TRIAL

Class Shown In Rally 2B
Armband # 213 Score 100 Dog's Name Piccolos Nail Delaney
UKC # L110-587 Breed Poodle
Owner Marquitta Plank Handler X

HIGH SCORING JUNIOR

Class Shown In _____
Armband # _____ Score _____ Dog's Name _____
UKC # _____ Breed _____
JR # _____

FOR UKC USE ONLY

Date Received _____
Bookkeeping _____ By _____
Processed _____ By _____

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.