



OFFICIAL RALLY OBEDIENCE TRIAL REPORT

EVENT DATE 12-11-16 TRIAL 1 2 (Only indicate if more than one Trial per day)

CLUB NAME Trained N Talented Canines CLUB ID PA0090

(Do not abbreviate)

CITY Newville STATE PA

Licensed Classes	Number of Pre-Entries	<u>14</u>
	Number of Day-Of-Show Entries (N/A for pre-entry only events)	<u>1</u>
	Grand Total	<u>15</u>

Time Trial Started 5:20

Conclusion of Last Class 6:30

- 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 _____
- 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 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 [Signature]
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 suzgwhite@netscape.net

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

X [Signature]
Signature of Event Secretary

HIGH IN TRIAL Class Shown In Rally ZB
 Armband # 602 Score 100 Dog's Name Precious Honored Panting
 UKC # R191-354 Breed Labrador Retriever
 Owner Lorraine Fox Handler [Signature]

HIGH SCORING JUNIOR Class Shown In _____
 Armband # 606 Score _____ Dog's Name _____
 UKC # _____ Breed _____
 JR # _____

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 _____