

OWNER: McHair, Denver, 585 3473417 Phone: 175, 153

ADDRESS (Street & No., City, Zip Code): 85780x 731 Sturgeon WA 98018

Animal Registered Name: Francesca

Breed/Variety: Fawn/Gorgans Fancy Chocofats

Coat color/type: Chocofats #095571361

Permanent ID#: 498418



CANINE EYE REGISTRATION FOUNDATION

Northwest Veterinary Specialists
175, 153 Michelle Taylor, DVM, DACVO
Paul Scherle, DVM, DACVO
16756 SE 82nd Drive
Clackamas, OR 97015
(503) 656-3999

I hereby declare that the animal submitted for exam is the animal described above. Furthermore, I declare I am the owner or agent of the owner of this animal.

Signature: [Handwritten Signature]

REGISTRATION NO. [Blank]

PRESS FIRMLY. FILL COMPLETELY.

SEX: Male Female

BIRTH DATE: [Blank]

Table with columns for Birth Date (Jan-Dec) and checkboxes for each month.

Table with columns for Exam Date (Jan-Dec) and checkboxes for each month.

FOR CERF USE ONLY: BREED, COLOR, etc.

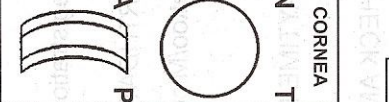
Table for CERF use with columns for Breed, Color, and checkboxes.

RIGHT EYE: GLOBE, EYELIDS, EYELENS, etc.

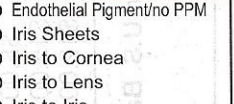
RIGHT EYE: FUNDUS, etc.



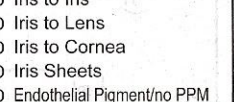
CORNEA, Iritis, Iris to Cornea, Iris to Lens, Iris to Iris, etc.



CORNEA, Iritis, Iris to Cornea, Iris to Lens, Iris to Iris, etc.



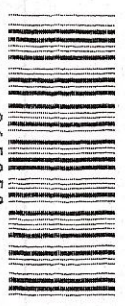
CATARACT: Diff. Inter. Punc. Diff. LENS, etc.



CATARACT: Diff. Inter. Punc. Diff. LENS, etc.

Signature: [Handwritten Signature] Date: 4-19-07

Diplomate, American College of Veterinary Ophthalmologists



ACVO # [Blank]

COMMENTS: [Blank]

Table with columns for ACVO # and checkboxes for each digit.