

Breeder Excellence Canine Brucellosis Screening Inventory

License Number: _____ Owner Name: _____

Inventory

Animal	Identification 1	Identification 2	Age/ D.O.B.	Sex	Breed	Test Result
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

Certification and Signature:

I certify that the attached canine inventory is complete and accurate as of the date listed and includes all sexually intact canines over the age of twenty-eight weeks and all canines that live on the premises but are not part of the breeding population.

Owner signature: _____ Date: _____