

Clinical Examination

Name and address of examining veterinarian:

This is to certify, that the Boxer

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chip number:

date of birth :..... male dog female dog

pet owner:

address:

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free from eye diseases such as distichiasis and dermoid sinus.

There is no indication of chondrodysplasia.

No indication of pronounced brachycephaly and brachygnathia.

The dog shows no respiratory disorders.

Overall assessment: On the day of the examination, there are no objections regarding the breed-specific characteristics.

There are no signs of traits associated with extreme breeding.

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date

name and signature of examining veterinarian/stamp