

## BREEDING REPORT

### **Bitch:**

\*Name:

\*DoB:

Previous breeding history:  
(Mated, but no litter, etc)

No. of previous litters:

### **Mating:**

Age at Mating:

Day(s) into Season mated:

No of times mated:

Length of pregnancy:

### **Whelping:**

No of whelps born:

Deaths within 3 weeks:

No of live whelps:

Details of whelping:

(C-section, oxytocin, natural birth, etc.)

Any abnormalities in puppies:

Any problems with bitch:

(Eclampsia, lack of milk, refusal to care for pups, etc)

Any problems with pups:

\*Breeder:

\*email/phone:

**\*optional.**

**If you prefer to send in forms anonymously this is quite acceptable. ALL information will be treated confidentially, unless the breeder gives specific permission for it to be released.**

**Please return completed form to Breed Health Co-ordinator: Wendy Tobijanski  
Hillcrest, Rhyn Lane, St Martins, Oswestry SY10 7AY  
or email to: [janskiceskys@btinternet.com](mailto:janskiceskys@btinternet.com)**