KENNEL BOARDING RECORD

Chicago Police Department/K-9 Unit

☐ TSA K9 ☐ CPD K9

Name of K9:_____

Handler:_____ Emergency #: _____

Drop Off Date:	Pick Up Date:
Time In:	Time Out:

Dogs are fed 2x a day

Food Type:_____ # of cups each feeding:_____

Medications: _____

_____

_____

Remarks: _____

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