

## **Certification of Medical Record**

I, *Dr. Robert Reisman*, the Medical Coordinator of Abuse Cases at, the Henry Bergh Memorial Hospital of The American Society for the Prevention of Cruelty to Animals, 424 East 92<sup>nd</sup> Street, New York, New York, 10128, certify that the attached document is a true and accurate copy of the medical record of;

### ANIMAL IDENTIFICATION

#### **Humane Law Enforcement**

#### **Bergh Memorial Animal Hospital**

#### **Animal Placement**

I also certify that this record was made in the regular course of business of this Hospital. That, it is the regular business of this Hospital to make and keep such a record, and that the record was made upon the dates set forth or within a reasonable time of the condition, act, transaction, occurrence, or event.

*Dr. Robert Reisman*

Dr. Robert Reisman

**Date:**     /     /07