



RYSE

DOB: 5/20/2014

**OFA Hips: Good | OFA Elbows: Normal | Heart: ECHO Clear
Eyes: Cleared Annually | PRA: Clear | EIC: Clear | HNPk: Clear**



RYSE DEPREDADOR (ANGUIANO)

Bred & Owned by Jorge Anguiano, Anguk Labradors, Mexico

<i>Sire</i> Hollyridge Lobuff Taylor Made	<i>Sire</i> CH Lobuff Hollyridge Wizard of Oz	<i>Sire</i> CH Lobuff Hollyridge Osprey
		<i>Dam</i> Rocheby Replica
	<i>Dam</i> CH Lobuff's Puffin at Hollyridge	<i>Sire</i> CH Boradors By George
		<i>Dam</i> CH Lobuff's Turtle Dove
<i>Dam</i> Anya Stroud (Anguiano) Mex. FCI	<i>Sire</i> CH Hypspire Adrenaline Rush	<i>Sire</i> CH Boradors By George
		<i>Dam</i> Hypspire Cavanaugh
	<i>Dam</i> Gabana Girl (Anguiano) Mex. FCI	<i>Sire</i> Camp Mex. Tabatha's Excalibur
		<i>Dam</i> Laide Shelby (Anguiano) Mex. FCI

AMERICAN KENNEL CLUB

NAME
RYSE DEPREDAOR (ANGUIANO) (MEXICO)

NUMBER
SR93195401

BREED
LABRADOR RETRIEVER

SEX
MALE

COLOR
YELLOW

DATE OF BIRTH
MAY 20, 2014

SIRE
HOLLYRIDGE LOBUFF TAYLOR MADE ~ SR52410803 01-11 OFA29G OFEL24 AKC
DNA #V628397

DAM
ANYA STROUD (ANGUIANO)
FCM FCML1675-E

BREEDER
JORGE ANGUIANO MENDOZA

OWNER

JORGE ANGUIANO



AMERICAN
KENNEL CLUB®

CERTIFICATE ISSUED

This certificate invalidates all previous certificates issued.

If a date appears after the name and number of the sire and dam, it indicates the issue of the Stud Book Register in which the sire or dam is published.

For Transfer Instructions, see back of Certificate.

This Certificate issued with the right to correct or revoke by the American Kennel Club.

REGISTRATION CERTIFICATE



WWW.ELIZABETHARELLANO.COM



Canine Genetic Health CertificateTM

Call Name: RYSE
Registered Name: RYSE DEPREDAOR (ANGUIANO)
MEX FCI
Breed: Labrador Retriever
Sex: Male
DOB: May 2014

Laboratory #: 12107
Registration #: FCMJ 7398-A
Microchip #: 939000002365660
Tattoo: J 7398-A
Certificate Date: June 19, 2015

This canine's DNA showed the following genotype(s):

Disease	Gene	Genotype	Interpretation
Exercise-induced collapse	<i>DNM1</i>	WT/WT	Normal
Hereditary nasal parakeratosis	<i>SUV39H2</i>	WT/WT	Normal
Progressive retinal atrophy, Progressive rod-cone degeneration	<i>PRCD</i>	WT/WT	Normal

WT, wild type (normal); M, mutant

Paw Print Genetics™ performed the tests listed on this dog. See the Laboratory Report for interpretation and recommendations based on these findings. The genes/diseases reported here were selected by the client. Normal results do not exclude inherited mutations not tested in these or other genes that may cause medical problems or may be passed on to offspring. These tests were developed and their performance determined by Paw Print Genetics. This laboratory has established and verified the tests' accuracy and precision. Because all tests performed are DNA-based, rare genomic variations may interfere with the performance of some tests producing false results. If you think these results are in error, please contact the laboratory immediately for further evaluation. Genetic counseling is available at Paw Print Genetics.

Blake C Ballif, PhD
Laboratory & Scientific Director

Casey R Carl, DVM
Associate Medical Director

ORTHOPEDIC FOUNDATION FOR ANIMALS, INC.



RYSE DEPREDAOR (ANGUIANO)

registered name

LABRADOR RETRIEVER

breed

939000002365660

tattoo/microchip/DNA profile

1820424

application number

7/18/2016

date of report

RESULTS:

Based upon the radiograph submitted, the consensus was that no evidence of hip dysplasia was recognized. The hip joint conformation was evaluated as:

SR93195401

registration no.

M

sex

5/20/2014

date of birth

25

age at evaluation in months

LR-221812G25M-VPI

O.F.A. NUMBER

This number issued with the right to correct or revoke by the Orthopedic Foundation for Animals.



A Not-For-Profit Organization

GOOD

G.G. Keller, DVM

G.G.KELLER, D.V.M., M.S., DACVR
CHIEF OF VETERINARY SERVICES

owner

JORGE ANGUIANO

467 CR 131

GAINESVILLE, TX 76240

www.offa.org

ORTHOPEDIC FOUNDATION FOR ANIMALS, INC.



RYSE DEPREDAOR (ANGUIANO)

registered name

LABRADOR RETRIEVER

breed

939000002365660

tattoo/microchip/DNA profile

1820424

application number

7/18/2016

date of report

RESULTS:

Based upon the radiograph submitted, the consensus was that no evidence of elbow dysplasia was recognized.

SR93195401

registration no.

M

sex

5/20/2014

date of birth

25

age at evaluation in months

LR-EL73807M25-VPI

O.F.A. NUMBER

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A Not-For-Profit Organization

NORMAL

G.G. Keller, DVM

G.G.KELLER, D.V.M., M.S., DACVR
CHIEF OF VETERINARY SERVICES

owner

JORGE ANGUIANO

467 CR 131

GAINESVILLE, TX 76240

www.offa.org

ORTHOPEDIC FOUNDATION FOR ANIMALS, INC.



RYSE DEPREDAADOR (ANGUIANO)
registered name

SR93195401
registration no.

LABRADOR RETRIEVER
breed

M
sex

5/20/2014
date of birth

33
age at evaluation in months



A Not-For-Profit Organization

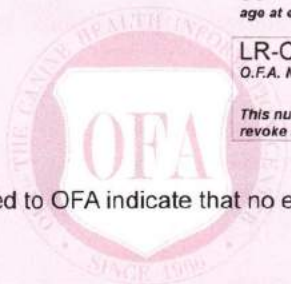
939000002365660 DNA:V794456
tattoo/microchip/DNA profile

1820424
application number

LR-CA9790/33M/S-VPI-ECHO
O.F.A. NUMBER

2/28/2017
date of report

*This number issued with the right to correct or
revoke by the Orthopedic Foundation for Animals.*



RESULTS:

The results of the examination submitted to OFA indicate that no evidence of congenital cardiac disease was recognized.

NORMAL - SPECIALIST, ECHO

owner

JORGE ANGUIANO
467 CR 131
GAINESVILLE, TX 76240

G.G. Keller, D.V.M.

G.G.KELLER, D.V.M., M.S., DACVR
CHIEF OF VETERINARY SERVICES

www.offa.org





Orthopedic Foundation for Animals
 2300 E. Nifong Blvd, Columbia, MO 65201-3806
 Phone: (573) 442-0418; Fax: (573) 875-5073
 www.ofa.org, A not-for-profit organization

Registered name: RISE DEPRDADOR (ANGUANO)
 Breed: LABRADOR RETRIEVER Sex: M
 ID Number (if any): Tattoo Microchip
 Registration Number: 0R93195401 JMC Other
 Date of Birth: 052014 Date of Exam: 111914
 Owner Name: JORGE ANGUANO Phone: 940-668-2893
 Co-Owner Name: _____
 Owner Address: 467 CR 131 State: TX Zip/postal code: 76240
 City: GAINESVILLE
 E-Mail (use both lines if needed): DICKENDALL@SUDDENLINK.NET

I hereby certify that the animal examined is the animal described on this application, and understand that the results of this exam will be submitted by the examining ophthalmologist to the database for statistical gathering purposes. I understand that only passing results will be released to the public unless the initials of a registered owner or authorized agent appear in the authorization box below which permits the OFA to release non-passing results to the public.

Signature of owner or authorized agent/representative _____
 I hereby authorize the OFA to release the results of the evaluation of the animal described on this application to the public if the results are non-passing (initials) _____

- OFA Eye Clearance Database**
- Initial submission..... \$ 12.00
 - Resubmits..... \$ 8.00
 - Litter of 3 or more submitted together..... \$ 30.00
 - Kennel Rate - Minimum of 5 individuals submitted as a group, owned/co-owned by same person..... \$ 7.50
 - Submission of non-passing results in the open database: NO CHARGE

Payments can be made by check, money order (U.S. funds drawn on a U.S. bank), cash, Visa, or Mastercard, payable to the Orthopedic Foundation for Animals.
 To pay by Credit Card, see the back of the WHITE sheet.



340613

Companion Animal Eye Registry (CAER)

Ophthalmologist Name: _____
 Dr. Art J. Quinn EC057
 210 Cedar Lane
 Sand Springs, OK 74063
 _____/postal code: _____

RIGHT EYE	GLOBE	LEFT EYE
<input type="checkbox"/> microphthalmos	<input type="checkbox"/> N	<input type="checkbox"/> microphthalmos
<input type="checkbox"/> keratoconjunctivitis sicca	<input type="checkbox"/> T	<input type="checkbox"/> keratoconjunctivitis sicca
<input type="checkbox"/> glaucoma	<input type="checkbox"/> A	<input type="checkbox"/> glaucoma
EYELIDS		EYELIDS
<input type="checkbox"/> entropion		<input type="checkbox"/> entropion
<input type="checkbox"/> ectropion		<input type="checkbox"/> ectropion
<input type="checkbox"/> distichiasis		<input type="checkbox"/> distichiasis
<input type="checkbox"/> ectopic cilia		<input type="checkbox"/> ectopic cilia
<input type="checkbox"/> imperforate lacrimal punctum		<input type="checkbox"/> imperforate lacrimal punctum
NICTITANS		NICTITANS
<input type="checkbox"/> cartilage anomaly/eversion		<input type="checkbox"/> cartilage anomaly/eversion
<input type="checkbox"/> gland prolapse		<input type="checkbox"/> gland prolapse
<input type="checkbox"/> plasmoma/atypical pannus		<input type="checkbox"/> plasmoma/atypical pannus
CORNEA		CORNEA
<input type="checkbox"/> dystrophy — epithelial/stromal		<input type="checkbox"/> dystrophy — epithelial/stromal
<input type="checkbox"/> dystrophy — endothelial		<input type="checkbox"/> dystrophy — endothelial
<input type="checkbox"/> pannus		<input type="checkbox"/> pannus
<input type="checkbox"/> pigmentary keratitis/keratopathy		<input type="checkbox"/> pigmentary keratitis/keratopathy
UVEA		UVEA
<input type="checkbox"/> uveal cyst		<input type="checkbox"/> uveal cyst
<input type="checkbox"/> iris coloboma		<input type="checkbox"/> iris coloboma
<input type="checkbox"/> iris hypoplasia		<input type="checkbox"/> iris hypoplasia
<input type="checkbox"/> iris sphincter dysplasia		<input type="checkbox"/> iris sphincter dysplasia
<input type="checkbox"/> pigmentary uveitis		<input type="checkbox"/> pigmentary uveitis
<input type="checkbox"/> uveal melanoma		<input type="checkbox"/> uveal melanoma
<input type="checkbox"/> persistent pupillary membranes		<input type="checkbox"/> persistent pupillary membranes
LENS		LENS
<input type="checkbox"/> anterior cortex		<input type="checkbox"/> anterior cortex
<input type="checkbox"/> posterior cortex		<input type="checkbox"/> posterior cortex
<input type="checkbox"/> equatorial cortex		<input type="checkbox"/> equatorial cortex
<input type="checkbox"/> anterior sutures		<input type="checkbox"/> anterior sutures
<input type="checkbox"/> posterior sutures		<input type="checkbox"/> posterior sutures
<input type="checkbox"/> nucleus		<input type="checkbox"/> nucleus
<input type="checkbox"/> capsular		<input type="checkbox"/> capsular
<input type="checkbox"/> generalized/complete		<input type="checkbox"/> generalized/complete
<input type="checkbox"/> resorbing/hypermature		<input type="checkbox"/> resorbing/hypermature
<input type="checkbox"/> suspect not inherited		<input type="checkbox"/> suspect not inherited
<input type="checkbox"/> subluxation/luxation		<input type="checkbox"/> subluxation/luxation
VITREOUS		VITREOUS
<input type="checkbox"/> PHPV/PHTVL		<input type="checkbox"/> PHPV/PHTVL
<input type="checkbox"/> persistent hyaloid artery		<input type="checkbox"/> persistent hyaloid artery
<input type="checkbox"/> degeneration		<input type="checkbox"/> degeneration
<input type="checkbox"/> ant. chamber		<input type="checkbox"/> ant. chamber
<input type="checkbox"/> syneresis		<input type="checkbox"/> syneresis

RIGHT EYE	FUNDUS	LEFT EYE
<input type="checkbox"/> detached	<input type="checkbox"/> retinal detachment	<input type="checkbox"/> detached
<input type="checkbox"/> geographic	<input type="checkbox"/> retinal atrophy—generalized	<input type="checkbox"/> geographic
<input type="checkbox"/> folds	<input type="checkbox"/> retinopathy	<input type="checkbox"/> folds
<input type="checkbox"/> choroidal hypoplasia	<input type="checkbox"/> retinal dysplasia	<input type="checkbox"/> choroidal hypoplasia
<input type="checkbox"/> coloboma	<input type="checkbox"/> choroidal hypoplasia	<input type="checkbox"/> coloboma
<input type="checkbox"/> optic nerve coloboma	<input type="checkbox"/> optic nerve coloboma	<input type="checkbox"/> optic nerve coloboma
<input type="checkbox"/> optic nerve hypoplasia	<input type="checkbox"/> optic nerve hypoplasia	<input type="checkbox"/> optic nerve hypoplasia
<input type="checkbox"/> micropapilla	<input type="checkbox"/> micropapilla	<input type="checkbox"/> micropapilla
OTHER CONDITIONS		
<input type="checkbox"/> Unlisted conditions suspected as inherited. Describe in comments		
<input type="checkbox"/> Unlisted conditions suspected as not inherited		
NORMAL		

I DID verify microchip/tattoo on this dog
 I DID NOT verify microchip/tattoo on this dog

I certify that I have performed this ophthalmic examination using pharmacological mydriasis, ophthalmoscopy, and biomicroscopy.

Signature: A. J. Quinn ACVO # 57 Date 11-19-10
 Diplomat, American College of Veterinary Ophthalmologists

Comments _____



KoCCA Anguiano

introducing Ryse's beautiful daughter

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2016

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2016

Winners Bitch at Mexican National Specialty under Judge Laura Fletcher
Bred & Owned by Jorge Anguiano (Anguk Labradors, Mexico)

2 of Ryse's Litters



DICKENDALL

LABRADOR RETRIEVERS

DICK & KENDALL HERR | dickendall@suddenlink.net
467 CR 131 GAINESVILLE, TX 76240 | 940-668-2893

WWW.DICKENDALL.COM