

# PACING DECLARATION

					Sire Location:		HN		PP	
							<input type="text"/>		<input type="text"/>	
Age	Sex	Lasix	Meds	Entry	Equipment		Race Number		Race Date	
							<input type="text"/>		<input type="text"/>	
Trainer			Driver		Claiming Price					
							<input type="text"/>		<input type="text"/>	
Contact Information					Entered By		Preference Dates		Online Entry	
			Event:		Contact Information					
			Alternate Events				Entry Accepted By		Date & Time Accepted	

P

**Ownership:**

**Conditions:**

**Race Office Note:**

**Online Submitter Note:**