

Pre-Entries close by receipt of Friday's mail 09/17/21 at the Trial Secretary's Home



AKC All Breed FAST CAT PREMIUM LIST

ONE Fast CAT Tests on Friday – October 1st, 2021
Test #1 AKC Event #2021097737

TWO Fast CAT Test on Saturday – October 2nd, 2021
Test #1 AKC Event #2021097738
Test #2 AKC Event #2021097739

TWO Fast CAT Test on Sunday – October 3rd, 2021
Test #1 AKC Event #2021097740
Test #2 AKC Event #2021097741

*** Entries received after the close date; the day of entries fee applies. ***

Greater Ocala Dog Club Show Grounds
10205 NW Gainesville Road, Ocala, FL 34482

Test Property Hours: 8:00 AM – 4:00 PM
Breakfast & Lunch will be available on site.
Lunch Break 12:00 – 1:00



Permission has been granted by the AKC for the holding of these events under the American Kennel Club rules and regulations.

THIS EVENT WILL ACCEPT MIXED BREED ENTRIES ***

Officers of GODC

President Phil Briasco Treasurer Sue Harris
Vice President Tony DiSiena Secretary Shirley Baker

ENTRIES LIMITED TO 100 PER TEST

Test Committee

Event Chairperson

Shirley Baker
3711 SW 7th Avenue Road
Ocala, FL 34471

Trial Secretary

Lisa Forbes
7825 SW 12th Street
Ocala, FL 34474
352-875-1354 RotnRott@aol.com

Lure Operator: Josh Hunt

Hunt Master: Brian LeNobel

Event Committee

Shirley Baker, Danatte Weaver, Brian LeNobel, Cole Fullam & Josh Hunt

Entry for test \$25.00 per test

Test Entries received after the close date; the day of entries fee applies. ~

Day of test entry \$30.00 per test (if space is available)

There will be a minimum \$25 return check charge.

Make checks payable to “**GODC**”

Mail to: **Lisa Forbes, 7825 SW 12th Street, Ocala, FL 34474**

The Event Secretary cannot accept conditional, unsigned, incomplete, or unpaid entries; please check your entry carefully. Entries by e-mail will NOT be accepted.

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Worker Dogs will run from \*\* Prior to 9:00 AM for AM runs PM if time allows  
Pre-entry Check in and Inspection starts at 8:30 AM

First Run - 9:00 AM  
Day of Entries start at – 8:30 AM  
LUNCH BREAK – 12:00 to 1:00\*\*

**\*\*If needed, we reserve the right to put a cut off time before lunch.**

**Entering:**

You will need a separate entry for each event.

Please write your email clearly, entries will be acknowledged by email only.

Enter your dog’s AKC number (PAL/ILP) or Canine Partner number).

If you do not have a number, please visit the AKC web site. <https://www.akc.org/register/>

For a PAL/ILP number (for purebred dogs) visit <https://www.akc.org/pdfs/ilpform.pdf>  
Canine partners number (for mixed breeds), visit  
<https://www.akc.org/caninepartners/enroll.cfm>

**Inspection:** Each entry will be inspected by the inspection committee for lameness and fitness to compete and females in season. **All dogs to be inspected MUST be presented BEFORE EVERY RUN**, WITHOUT TAPE, BANDAGES or WRAPPING, COVERING of any kind. (Coats, blankets, etc.) If in the opinion of the inspection committee any entry is found to be lame, unfit to compete or in season they shall not be allowed to run, and the applicable entry fees shall be refunded. **The Inspection Committee has the authority to disallow a dog's entry.**

**Fun Runs:** Practice will be held when no test participants are waiting. \$10.00 per fun run. Dogs' underage will do ½ track.

**Running Your Dog:** It is recommended that dogs be handled with a "slip-lead" that gives an instantaneous freedom to the dog when "Tallyho" (release) signal is called by the Huntmaster. Dogs may run with or without any collar for safety reasons. **Unacceptable collars:** are a choker collar, a collar with prongs or an electronic training collar. Owners may use a rubber band to hold the dog's hair from their eyes. The owner assumes responsibility for the safety of the dog with regard to the dog's collar and paraphernalia on the dog (No Tags).

**Refund Policy:** NO refunds after closing date will be given for any reason. Refunds are allowed prior to closing date less a \$10.00 fee. No exceptions. (This does not apply to bitches in heat or lame dogs.)

**Awards:** Pass: Light Blue flat ribbon. **Title Completion:** GODC Title Ribbon by Class.

**We request that you notify us prior to the event if you feel that your dog may earn a new title.**

**Eligibility:** Open to all dogs at least 12 months of age that are individually registered with AKC, recorded in the Foundation Stock Services (FSS) program, individually registered with a foreign or domestic registry organization whose pedigrees are acceptable for AKC registration, dogs granted a Purebred Alternative Listing (PAL) number, dogs with AKC Limited or Conditional Registration, or dogs enrolled in the AKC Canine Partners program. Dogs with breed disqualifications and monorchid/cryptorchid dogs are eligible to participate. Females in season may not enter. A dog may enter only once per event number.

- Coursing is an athletic activity that can tax a dog's physical strength.
- Dogs that are overweight and/or out of condition may be at greater risk for injury and exhaustion.

More information can be found at [www.AKC.org](http://www.AKC.org).

## NOTICE TO EXHIBITORS

**Exhibitors are reminded to bring their own chairs, shade, water, etc.**

All dogs run at owners' sole risk. The hosting club and property owners, their agents, members, representatives, volunteers, etc. assume NO responsibility for any loss, damage, or injury sustained by exhibitors and handlers or to any of their dogs or property and further assumes no responsibility for injury to children or spectators before, during or after this event.

### CONDITIONS OF ENTRY

- ~ **A \$5.00 fine will be assessed for any loose dog on the field that is not competing on the course in progress.**
- ~ Once your dog enters the field there will be no refunds, even if your dog does not want to run.
- ~ **A \$5.00 fine will be assessed for any handler not cleaning up after their dog.**
- ~ Any dog displaying aggression towards people or other dogs, will be asked to leave without refund.
- ~ **Any dog that eliminates on the course will receive a non-qualifying (NQ) score.**
- ~ Powered by Electric, continuous loop equipment will be used. (SwiftPaws machine)
- ~ Lure consists of white plastic.
- ~ The Huntmaster is responsible for field safety and therefore he/she is in complete charge of all dogs and handlers on the field. In service to this responsibility, he/she has the authority to stop the lure in any potentially dangerous situation and signal the handler to retrieve a testing dog.
- ~ GODC reserves the right to alter course due to field and/or weather conditions on the day of the test.
- ~ At its discretion, GODC may break periodically during the day to accommodate worker runs, machine adjustments and lunch.
- ~ Children **MUST** be under control of their parents or guardians at all times.
- ~ Only the Lure Operator, Huntmaster will be permitted near the lure machine.
- ~ If because of riots, civil disturbances, or other acts beyond the control of GODC, it is impossible to hold or complete the tests a refund of entry fees will not be made.
- ~ Exhibitors are requested to bring another person with them for catching or releasing, but the club can provide, if necessary, but reserves the right to deny service for safety reasons.
- ~ **This course is fenced. Tests will run concurrently. Electric timers are used.**

## NOTICE

### **ALL DOGS RUN AT OWNER'S SOLE RISK**

- Entries will not be accepted without fees, signatures, or the "Agreement" found on the Official AKC Entry Form.

**FAST CAT** is a timed straight race of 100 yards where a dog chases a lure. Dogs are run singularly and earn points based on their handicapped speed. There are no placements. Titles are issued at designated benchmarks. The dogs' time to complete the 100-yard dash is converted into MPH. A handicap system is applied to a dog's MPH to determine the number of points earned. The handicap system is based on the height of the dog at its withers:

- 18" or greater = handicap is 1.0
- 12" up to less than 18" = handicap is 1.5
- Below 12" = handicap is 2.0

$204.545/\text{time} = \text{MPH}$

Example: The dog's time is 8.14 seconds

$204.545/8.14 = 25.13 \text{ MPH}$

Points + MPH multiplied by the dog's handicap. Titles are earned by accumulating points. The following titles will be awarded:

BCAT = 150 Points

DCAT = 500 Points

FCAT = 1,000 Points

FCAT# = Every additional 500 Points

**Top 20 by Breed by Year: The AKC website will feature the Top 20 Fastest Dogs by Breed by Year national standings. The standings will be updated as event results are processed.**

UF Pet Emergency Treatment Services  
After-Hours Emergency Veterinary Clinic 352-512-0886

3200 SW 27th Avenue, Ocala, FL

Turn left out of property, turn left onto FL-326 to N. Pine Avenue, turn right onto N. Pine Avenue. Turn right onto SW 10th Street/SW College Road/State Road 200. Turn left onto SW 27<sup>th</sup> Avenue, UF Pet Emergency Treatment Services on the right.

**CAMPING:** Is available on premises. Contact:

Connie Sager  
407-973-4040

**LODGING:** Please remember to check pet policies when making reservations.

Red Roof Inn NW 40th Ave. Ocala, FL 855-352-7611  
Howard Johnson Inn 3951 NW Blitchton Rd. Ocala, FL 34482 352-629-7021  
La Quinta Inn 3530 SW 36th Ave. Ocala, FL 34474 352-861-1137

**AMERICAN KENNEL CLUB LURE COURSING ENTRY FORM**

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| Club:<br>Greater Ocala Dog Club<br>10205 NW Gainesville Rd<br>Ocala, FL 34482                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Date(s)<br>October 1, 2021<br>October 2, 2021<br>October 3, 2021                                                                                                          | Event #(s)<br>Fri # 2021097737<br>Sat # 2021097738 & # 2021097739<br>Sun # 2021097740 & 2021097741                                                |
| Location:<br>Greater Ocala Dog Club Showgrounds<br>12005 NW Gainesville Rd<br>Ocala, FL 34482                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Event Type:<br><input type="checkbox"/> Friday Fast CAT Test #1<br><input type="checkbox"/> Saturday Fast CAT Test #1<br><input type="checkbox"/> Sunday Fast CAT Test #1 | <input type="checkbox"/> Friday NO TEST<br><input type="checkbox"/> Saturday Fast CAT Test #2<br><input type="checkbox"/> Sunday Fast CAT Test #2 |
| <p align="center">One Entry Form per dog. Pre Entries must be at Trial Secretaries Home on/before 9/17/2021<br/>                 Pre Entry Fee PER TRIAL: \$25.00. Day of Entry \$30.00<br/>                 Make Checks payable to GODC Mail entries to Lisa Forbes 7825 SW 12th St. Ocala FL 34474</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                           |                                                                                                                                                   |
| Class:<br><input type="checkbox"/> Under 12" <input type="checkbox"/> 12" to under 18" <input type="checkbox"/> 18" & Over                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Breed:                                                                                                                                                                    | I Enclose Entry fees in the amount of:<br>\$ _____                                                                                                |
| Breeder:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Registration #                                                                                                                                                            | Sex: _____ Date of Birth: _____                                                                                                                   |
| Type of Registration: <input type="checkbox"/> AKC # <input type="checkbox"/> AKC Canine Partner # <input type="checkbox"/> PAL/ILP # <input type="checkbox"/> Foreign # (list country)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                           |                                                                                                                                                   |
| Full Name of Dog:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                           | Call Name:                                                                                                                                        |
| Sire:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                           |                                                                                                                                                   |
| Dam:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                           |                                                                                                                                                   |
| Actual Owner(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                           |                                                                                                                                                   |
| Owners Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                           |                                                                                                                                                   |
| City:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | State:                                                                                                                                                                    | Zip:                                                                                                                                              |
| Name of Jr. Handler (if any):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                           | Jr Handler #:                                                                                                                                     |
| Name of Owner's Agent/Handler (if any) at Trial:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                           |                                                                                                                                                   |
| <p align="center">AKC Rules, Regulations, Policies and Guidelines are available on the American Kennel Club website: <a href="http://www.akc.org">www.akc.org</a></p> <p align="center"><b>AGREEMENT</b></p> <p>I CERTIFY that I am the actual owner of this dog, or that I am the duly authorized agent of the actual owner whose name I have entered above. In consideration of the acceptance of this entry, I (we) agree to abide by the rules and regulations of The American Kennel Club in effect at the time of this trial, and by any additional rules and regulations appearing in the premium list for this trial, and entry form. I (we) certify and represent that the dog entered is not a hazard to persons or other dogs. The entry is submitted for acceptance on the foregoing representation and Agreement. I (we) agree that the club holding this event has the right to refuse this entry for cause which the club shall deem sufficient. In consideration of the acceptance of this entry and of the holding of this event and of the opportunity to have the dog judged and to win prize money, ribbons, or trophies, I (we) agree to hold the AKC, the event giving club, their members, directors, governors, officers, agents superintendents or event secretary and the owner or lessor of the premises and any provider of services that are necessary to hold this event and any employees or volunteers of the aforementioned parties, and any AKC approved judge, judging at this event, harmless from any claim for loss or injury which may be alleged to have been caused directly or indirectly to any person or thing by the act of this dog while in or about the event premises or grounds or near any entrance thereto, and I (we) personally assume all responsibility and liability for any such claim; and I (we) further agree to hold the aforementioned parties harmless from any claim for loss, injury or damage to this dog. Additionally, I (we) hereby assume the sole responsibility for and agree to indemnify, defend and save the aforementioned parties harmless from any and all loss and expense (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death at any time resulting there from, sustained by any person or persons, including myself (ourselves) or on account of damage to property, arising out of or in consequence of my (our) participation in this event, however such, injuries death or property damage may be caused, and whether or not the same may have been caused or may be alleged to have been caused by the negligence of the aforementioned parties or any of their employees, agents, or any other persons. I (WE) AGREE THAT ANY CAUSE OF ACTION, CONTROVERSY OR CLAIM ARISING OUT OF OR RELATED TO THE ENTRY, EXHIBITION OR ATTENDANCE AT THE EVENT BETWEEN THE AKC AND MYSELF (OURSELVES) OR AS TO THE CONSTRUCTION, INTERPRETATION AND EFFECT OF THIS AGREEMENT SHALL BE SETTLED BY ARBITRATION PURSUANT TO THE APPLICABLE RULES OF THE AMERICAN ARBITRATION ASSOCIATION. HOWEVER, PRIOR TO ARBITRATION ALL APPLICABLE AKC BYLAWS, RULES, REGULATIONS AND PROCEDURES MUST FIRST BE FOLLOWED AS SET FORTH IN THE AKC CHARTER AND BYLAWS, RULES, REGULATIONS, PUBLISHED POLICIES AND GUIDELINES.</p> |                                                                                                                                                                           |                                                                                                                                                   |
| Signature of Owner or his Agent duly authorized to make the entry:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                           |                                                                                                                                                   |
| Telephone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | E-mail Address:                                                                                                                                                           |                                                                                                                                                   |