

DO NOT STAPLE

STATE OF SOUTH CAROLINA

SUBMIT WITHIN 7 DAYS OF DATE ISSUED

COMPANION ANIMAL CERTIFICATE OF VETERINARY INSPECTION

SC FORM 149
(REV 02/16)☒ CANINE ☐ FELINE ☐ PET BIRD

No. A 292573

Origin Contact 158 PINECREST/10161116/1704/779 6662Destination Contact WYOMOUTH SPCA (732) 542-0040Origin Address 168 Highway 279 #311 LIMEVILLE, SC 29710Destination Address 260 Wall Street + Edgemoor, NJ 07724

AGE	SEX	DESCRIPTION - BREED	RABIES VACCINE ADMINISTERED	
			DATE	TAG NUMBER
10YRS	F	TOOTSIE Black w/ Grey face Rat Terrier mix	11/11/2022	95346
5WKS	M	HEATH-Black/White Terrier mix	too young	N/A
5WKS	M	Rob. Tan/White Terrier mix	too young	N/A
5WKS	F	Elita ^{Archie} Brown Terrier mix	too young	N/A

I certify that I have examined the above described companion animals and found them to be free from symptoms of contagious, infectious or communicable disease and, to the best of my knowledge, have not been exposed to rabies. I am accredited in South Carolina and familiar with the entrance requirements of the state or country of destination and that this certificate is issued in compliance therewith.

NAME OF ACCREDITED VETERINARIAN (PRINT)	ADDRESS OF ACCREDITED VETERINARIAN	DATE	STATE VET USE ONLY
Jenna Blake, DVM	1125 N. Anderson Road Rock Hill, SC 29730	11/11/2022	
SIGNATURE OF ACCREDITED VETERINARIAN	TELEPHONE	FEDERAL ACCRED. #	
<u>Jenna Blake, DVM</u>	803-327-7387	028893	

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COMpanion ANIMAL CERTIFICATE OF VETERINARY INSPECTION
SC FORM 149
(REV 02/16)

☒ CANINE ☐ FELINE ☐ PET BIRD

No. A 292574

Origin Contact PSR Rescue/Julie Holker (704) 779-6662 Destination Contact Mommouth SPCA (732) 542-0040

Origin Address 1624 Highway 274 #311 Lakeland, FL 34710 Destination Address 2601 Wall Street Eatonton, GA 31039

AGE	SEX	DESCRIPTION - BREED	RABIES VACCINE ADMINISTERED	
			DATE	TAG NUMBER
Swcs	M	Flounder-Black Terrier Mix	too young	N/A
Swcs	M	Serpstein Brown/White Terrier Mix	too young	N/A
Swcs	M	Thin Brown/White Terrier Mix	too young	N/A

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NAME OF ACCREDITED VETERINARIAN (PRINT)

ADDRESS OF ACCREDITED VETERINARIAN

DATE

Jenna Blake, DVM

1125 N. Anderson Road
Rt 111 SE 291730

1/11/2022

SIGNATURE OF ACCREDITED VETERINARIAN

TELEPHONE

FEDERAL ACCRED. #

Jenna Blake, DVM

803-327-7337

028883

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COMPANION ANIMAL CERTIFICATE OF VETERINARY INSPECTION

SC FORM 149
(REV 02/16)☒ CANINE ☐ FELINE ☐ PET BIRDNo. A **292547**Origin Contact Perdue Poultry, Inc. 779.6462Destination Contact Monmouth State 1732) 542.0090Origin Address 168 Highway 279 #311 Lenoir, NC 26710Destination Address 260 Wall Street Edmonston, NT 07224

AGE	SEX	DESCRIPTION - BREED	RABIES VACCINE ADMINISTERED	
			DATE	TAG NUMBER
4yr.	FS	Pearl Black/White Lab Mix	12/29/2021	3279

I certify that I have examined the above described companion animals and found them to be free from symptoms of contagious, infectious or communicable disease and, to the best of my knowledge, have not been exposed to rabies. I am accredited in South Carolina and familiar with the entrance requirements of the state or country of destination and that this certificate is issued in compliance therewith.

STATE VET USE ONLY

NAME OF ACCREDITED VETERINARIAN (PRINT)

ADDRESS OF ACCREDITED VETERINARIAN

DATE

Jenna Blake, DVM1135 N. Anderson Road
Rock Hill, SC 2973011/1/2022

SIGNATURE OF ACCREDITED VETERINARIAN

TELEPHONE

FEDERAL ACCRED. #

Jenna Blake DVM803.321.7387028883

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STATE OF SOUTH CAROLINA
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SC FORM 149
 (REV 02/16)

SUBMIT WITHIN 7 DAYS OF DATE ISSUED

☒ CANINE ☐ FELINE ☐ PET BIRD

No. A **292549**

 Origin Contact PSP Rescue / Julie Hollar (704) 779-6662 Destination Contact Mannmouth SPA (732) 542-0040

 Origin Address 148 Highway 271 #311 Lenoirville, SC 29710 Destination Address 260 W111 Street Edinboro, NY 07734

AGE	SEX	DESCRIPTION - BREED	RABIES VACCINE ADMINISTERED	
			DATE	TAG NUMBER
8 wks	F	Jasmine Brown/white Boxer mix	120 young	N/A
8 wks	M	Jacob-Brown/white w/ Black muzzle Boxer	120 young	N/A

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NAME OF ACCREDITED VETERINARIAN (PRINT)	ADDRESS OF ACCREDITED VETERINARIAN	DATE
Jenna Blake, DVM	1135 N. Anderson Road Rock Hill, SC 29730	11/21/2022
SIGNATURE OF ACCREDITED VETERINARIAN	TELEPHONE	FEDERAL ACCRED. #
Jenna Blake, DVM	803.327.7387	028883

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COMPANION ANIMAL CERTIFICATE OF VETERINARY INSPECTION
 SC FORM 149
 (REV 02/16)

☒ CANINE ☐ FELINE ☐ PET BIRD

 No. A **292597**

 Origin Contact PSP Rescue/June Heller (704) 779 6662 Destination Contact Monmouth SPCA (732) 542-0040

 Origin Address K8 Highway 274 # 311 Lake Wayne, SC 29130 Destination Address 260 Wall Street Eatonton, NJ 07724

AGE	SEX	DESCRIPTION - BREED	RABIES VACCINE ADMINISTERED	
			DATE	TAG NUMBER
10wks	F	Asha Chocolate Lab mix	too young	N/A
10wks	F	Poppy Chocolate Lab mix	too young	N/A
10wks	M	Rob Chocolate Lab mix	too young	N/A
10wks	M	York Brn/wh/te Lab mix	too young	N/A

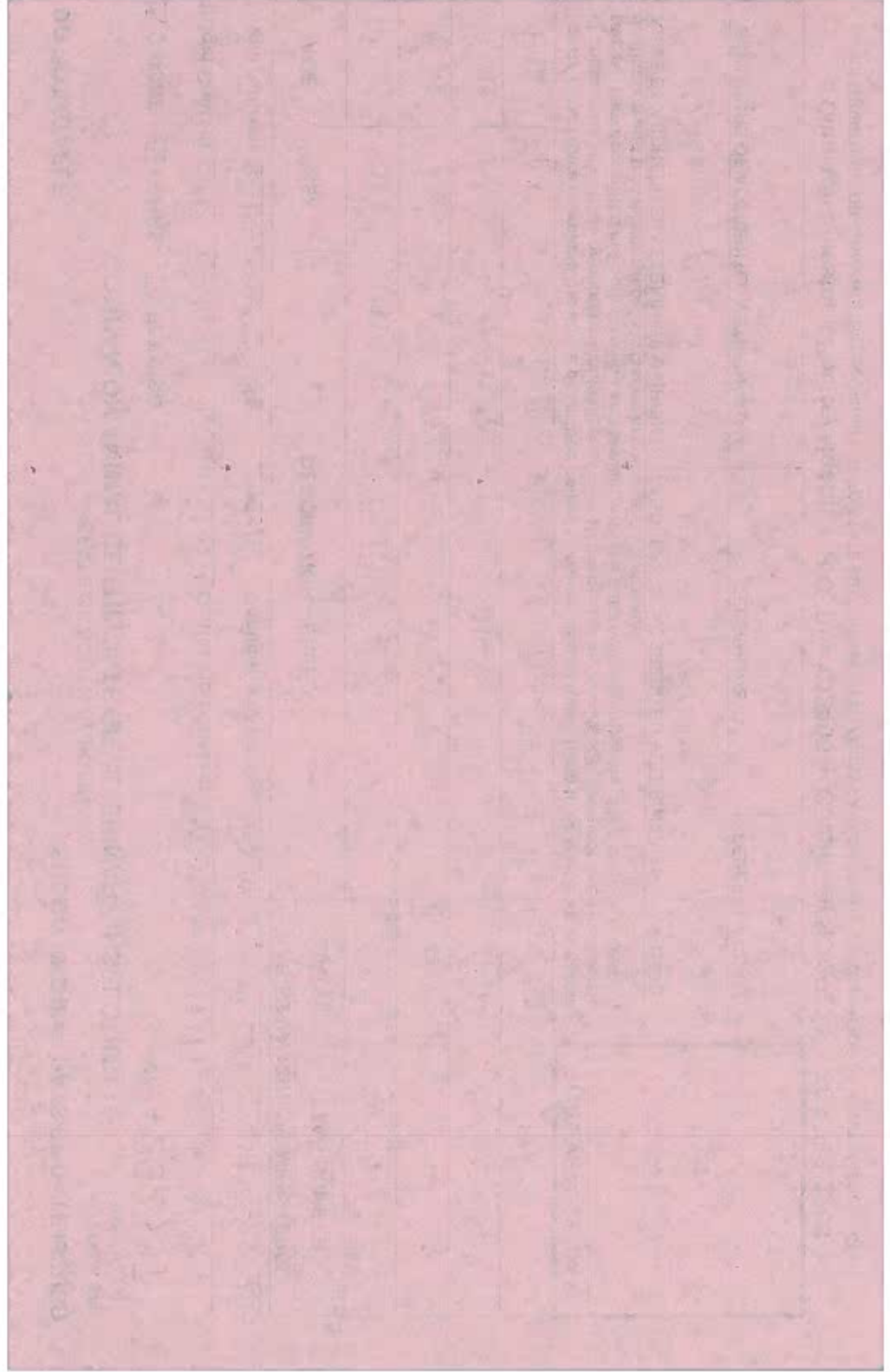
I certify that I have examined the above described companion animals and found them to be free from symptoms of contagious, infectious or communicable disease and, to the best of my knowledge, have not been exposed to rabies. I am accredited in South Carolina and familiar with the entrance requirements of the state or country of destination and that this certificate is issued in compliance therewith.

NAME OF ACCREDITED VETERINARIAN (PRINT)	ADDRESS OF ACCREDITED VETERINARIAN	DATE	STATE VET USE ONLY
Kathleen Avern, DVM	1125 N. Anderson Road Rock Hill, SC 29130	1/20/2022	

SIGNATURE OF ACCREDITED VETERINARIAN	TELEPHONE	FEDERAL ACCRED. #
<i>Kathleen Avern</i>	803.327.7387	072097

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COMPANION ANIMAL CERTIFICATE OF VETERINARY INSPECTION

SC FORM 149
(REV 02/16)

☒ CANINE ☐ FELINE ☐ PET BIRD

No. A 292576

Origin Contact PSP Rescue/Julie Hillier (761) 779-6662

Destination Contact MOMMOUTH SP(A 1732) 512-0040

Origin Address 1681 Hawthorn Dr #311

24710
Destination Address
XO Well Street Entertainment, NJ 07024

AGE	SEX	DESCRIPTION - BREED	RABIES VACCINE ADMINISTERED	
			DATE	TAG NUMBER
17wks	M.	Max Tricolor w/ white Paws Round mix	11/6/2022	95307
17wks	F	White-Black mix	11/6/2022	95306
11	1111	11111111	1111	1111
11	1111	11111111	1111	1111

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NAME OF ACCREDITED VETERINARIAN (PRINT)

ADDRESS OF ACCREDITED VETERINARIAN

DATE _____

Jenny Blake, DVM

25 N. ARLSON ROAD
ROSELAND, SC 29730

2002/11

SIGNATURE OF ACCREDITED VETERINARIAN

TELEPHONE

FEDERAL ACCRED. #

Anna Blake, DM

803-327-7387

02883

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DATE: 10/10/68

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Clemson Livestock Poultry Health - P.O. Box 195408 - Columbia, SC 29254 - 803.788.3500

SIGNATURE OF ACCREDITED VETERINARIAN

TELEPHONE

FEDERAL ACCREDITED

NAME OF ACCREDITED VETERINARIAN (PRINT)

ADDRESS OF ACCREDITED VETERINARIAN

DATE

Description and notes for complete is listed in compliance with with

I am provided in South Carolina and families with the evidence requirements of the state of South Carolina of exhibitors, exhibitors of domesticated animals and to the best of my knowledge have not been exposed to

STATE VET USE ONLY

AGE

SEX

DESCRIPTION - BREED

DATE

TAG NUMBER

RABIES VACCINE ADMINISTERED

Origin Address (City, State, Zip)

Date

Destination Address

Destination City, State, Zip

Origin Contact (City, State, Zip)

Destination Contact (City, State, Zip)

☒ CANINE ☐ FELINE ☐ PET BIRD

COMPANION ANIMAL CERTIFICATE OF VETERINARY INSPECTION

No. A 515380

REV. 02/01
SC FORM 146

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STATE OF SOUTH CAROLINA

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STATE OF SOUTH CAROLINA

SUBMIT WITHIN 7 DAYS OF DATE ISSUED

COMPANION ANIMAL CERTIFICATE OF VETERINARY INSPECTION

SC FORM 149
(REV 02/16)☒ CANINE ☐ FELINE ☐ PET BIRDNo. A **275383**Origin Contact SCOTT MCHENRY (604) 779-6602Destination Contact WENDY (410) 586-1111SPCA (732) 542-6640Origin Address 11411 HANNA (294) 531-5530Destination Address 261 HALL STREET (410) 586-1111

AGE	SEX	DESCRIPTION - BREED	RABIES VACCINE ADMINISTERED	
			DATE	TAG NUMBER
FNKS	M	GREY - BLINDIE / WHITE BOXER MIX	12/12/12	N/A
FNKS	M	BLACK BLINDIE BOXER MIX	12/12/12	N/A
FNKS	M	PURPLE TAN BOXER MIX	12/12/12	N/A
FNKS	M	BLACK BLINDIE / WHITE BOXER MIX	12/12/12	N/A

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NAME OF ACCREDITED VETERINARIAN (PRINT)

ADDRESS OF ACCREDITED VETERINARIAN

DATE

STATE VET USE ONLY

SIGNATURE OF ACCREDITED VETERINARIAN

TELEPHONE

FEDERAL ACCRED. #

Anna Blake, DVM(603) 321-7387C28883

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SC FORM 149
(REV 02/16)

SUBMIT WITHIN 7 DAYS OF DATE ISSUED

☒ CANINE ☐ FELINE ☐ PET BIRD

No. A 275379

Origin Contact

ESP/THIE HOUN (744) 779-1666

Destination Contact

WILSON (703) 225-42-1141

Origin Address

1125 N RANGLER DR
RICK HILL SC 29730

Destination Address

2602 N. MAIN STREET, FAIRFAX VA 22034

AGE	SEX	DESCRIPTION - BREED	RABIES VACCINE ADMINISTERED	
			DATE	TAG NUMBER
8 wks	M	MATCH - TRICOLOR BOXER MIX	TOO YOUNG	N/A
8 wks	M	ATTICUS - BLINDIE BOXER MIX	TOO YOUNG	N/A
8 wks	M	BEAU - BLINDIE/WHITE BOXER MIX	TOO YOUNG	N/A
11/11	11/11	11/11	11/11	11/11

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ADDRESS OF ACCREDITED VETERINARIAN

DATE

SIGNATURE OF ACCREDITED VETERINARIAN

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FEDERAL ACCRED. #

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COMPANION ANIMAL CERTIFICATE OF VETERINARY INSPECTION

SC FORM 149
(REV 02/16)☒ CANINE ☐ FELINE ☐ PET BIRD

No. A 269841

Origin Contact

Destination Contact

Origin Address

Destination Address

AGE

SEX

DESCRIPTION - BREED

DATE

TAG NUMBER

RABIES VACCINE ADMINISTERED

I certify that I have examined the above described companion animals and found them to be free from symptoms of contagious, infectious or communicable disease and, to the best of my knowledge, have not been exposed to rabies. I am accredited in South Carolina and familiar with the entrance requirements of the state or country of destination and that this certificate is issued in compliance therewith.

NAME OF ACCREDITED VETERINARIAN (PRINT)

ADDRESS OF ACCREDITED VETERINARIAN

DATE

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SIGNATURE OF ACCREDITED VETERINARIAN

TELEPHONE

FEDERAL ACCRED. #

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COMPANION ANIMAL CERTIFICATE OF VETERINARY INSPECTIONSC FORM 149
(REV 02/16)CANINE ☐ FELINE ☐ PET BIRD

No. A 269842

Origin Contact

Destination Contact

Origin Address

Destination Address

AGE

SEX

DESCRIPTION - BREED

DATE

TAG NUMBER

RABIES VACCINE ADMINISTERED

I certify that I have examined the above-described companion animals and found them to be free from symptoms of contagious, infectious or communicable disease and, to the best of my knowledge, have not been exposed to rabies. I am accredited in South Carolina and familiar with the entrance requirements of the state or country of destination and that this certificate is issued in compliance therewith.

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COMPANION ANIMAL CERTIFICATE OF VETERINARY INSPECTION

SC FORM 149
(REV 02/16)☒ CANINE ☐ FELINE ☐ PET BIRD

No. A 275380

Origin Contact PSP Rescue/Julie Holker (704) 779-6662 Destination Contact Monmouth SPCA (732) 542-0040

Origin Address 168 Highway 274 # 311 Littleville, SC 29710 Destination Address 260 East Street Lakewood, NJ 07724

AGE	SEX	DESCRIPTION - BREED	RABIES VACCINE ADMINISTERED	
			DATE	TAG NUMBER
QWKS	F	Melanie - Chocolate Boxer Mix	too young	N/A
QWKS	F	MelB - Tan Boxer Mix	too young	N/A
QWKS	F	Victoria - White / Black Boxer Mix	too young	N/A
QWKS	F	Emma - White Boxer Mix	too young	N/A

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ADDRESS OF ACCREDITED VETERINARIAN

DATE

Kathleen Alrein, DVM

1135 N. Anderson Road
Roll Hill, SC 29730

2/24/2002

SIGNATURE OF ACCREDITED VETERINARIAN

TELEPHONE

FEDERAL ACCRED. #

Kathleen Alrein

803-337-7387

072047

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