SMALL ANIMAL

HEALTH CERTIFICATE

STATE OF ALABAMA
Department of Agriculture and Industries
Animal Industry Division
1445 Federal Drive
Montgomery, Alabama 36107

AL-S 0041504

Date Issued 5-30-19

CONSIGNOR OR SHIPPER Sylacauga Animal Shelter

ORIGIN Sylacauga, AL 35150

COMPLETE PHYSICAL ADDRESS FOR CONSIGNOR 1212 Wynette Rd

CONSIGNEE OR PURCHASER St. Hubert's Animal Welfare

DESTINATION Madison, NJ 07940

COMPLETE PHYSICAL ADDRESS FOR CONSIGNEE 575 Woodland Ave

DESCRIPTION OF ANIMALS

Species	Breed	Sex	Age	Color or Markings	Rabies Tag No.
Canine	Lab Mix	F		Tan/white (Wiggle)	183331
Canine	Shep Mix	F		Tan (Cleo)	183192
Canine	MI Cur	M		Brindle (Bean)	183383
Canine	Lab Mix	M		Black (Taylor)	182921

VACCINATION DATA

	TYPE (Circle One)	Date
Rabies	MLV - K	5/30/19
DHLP	MLV - K	
FVRCP	MLV - K	N/A
OTHER		

APPROVED BY:

I hereby certify that I have examined the above animal(s) and find it to be free of any symptoms of communicable disease. To my knowledge this animal(s) has not been exposed to rabies.

Accredited Veterinarian Kevin Mullin, DVM

Printed Signature

Telephone No. 256-378-7066

Veterinary Accreditation No. 02047

Address 1440 Coosa Pines Dr Childersburg, AL 35044

Interstate Shipments: original-accompany shipment, canary-State Veterinarian, pink-State Veterinarian, goldenrod-issuing veterinarian

Foreign Shipments: original, canary and pink for USDA APHIS Veterinary Services 1445 Federal Drive, Montgomery, AL 36107-1123 goldenrod-issuing veterinarian

Tennessee Department of Agriculture
Consumer & Industry Services — Animal Health
Box 40627, Melrose Station
Nashville, TN 37204
615 837-5120

461131

Date Issued 5/31/2019
Expiration 30 days after issuance

OFFICIAL INTERSTATE HEALTH CERTIFICATE OF DOGS, CATS AND OTHER NON-LIVESTOCK SPECIES

Owner Humphrey's Co Humane
Address 112 Young Road
City Waverly
State TN
Telephone No. 931 296-7319

Consignee St Hubert's Animal
Address 575 Woodland Ave.
City Madison
State NJ Zip Code 07946
Telephone No. 973-377-2295

Species	Name	Breed	Sex	Age	Color & Markings	Micro chip ID	Rabies Tag #
Canine	Anna	Hound mix	F	11w	Black/White		
Canine	Katie	Hound mix	F	11w	Black/Tan		
Canine	Addie	Hound mix	F	11w	Black/Tan		
Canine	Spirit	Husky mix	m	8m	Black/Cream		160210 09
Canine	Mason	Shepherd mix	m	5m	Black/Tan		160210 10
Canine	Whiskers	Terrier mix	m	8w	Black/Cream		
Canine	Winnie	Terrier mix	F	8w	Tan/White		
Canine	Buddy	Terrier mix	m	8w	Black/White		
Canine	Roscoe	Terrier mix	MN	2y	Tan		16111
Canine	Marley	Chihuahua mix	FS	5y	Black/Brown		160210 23131
1	1	1	1	1	1	1	1

Remarks Eyes and Ears Clear

I certify that I am licensed and accredited in Tennessee and that I personally examined the 10 animal(s) described herein and found them to be free of evidence of infectious or communicable disease or exposure thereto. To the best of my knowledge, these animals meet the current import requirements of the State of Destination.

Vaccination Data				
Manufacturer	Serial #	Exp.	Type	Date
Zoetis	311023	2/20	killed	5/31

Distribution:
Interstate Shipments
White — TN State Veterinarian
* Canary — Accompany Shipment
* Pink — TN State Veterinarian
Goldenrod — Retain

Accredited Veterinarian Michael Riley Vet Code 059015
Type or Print
Signature Michael Riley
Address 310 Highway 641 N
City Camden State TN zip 38320
Email Address vetmed3106@gmail.com
Telephone: 731 213-2555

AG-0059 (Rev. 02/15)

RDA's pending

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for this information collection are 0579-0036 and 0579-0333. The time required to complete this information collection is estimated to average .25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

No dog, cat, nonhuman primate, or additional kinds or classes of animals designated by USDA regulation shall be delivered to any intermediate handler or carrier for transportation in commerce, unless accompanied by a health certificate executed and issued by a licensed veterinarian (7 U.S.C. 21,43,9; CFR, Subchapter A, Part 2).

OMB APPROVED
0579-0036
0579-0333

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

UNITED STATES INTERSTATE AND INTERNATIONAL CERTIFICATE OF HEALTH EXAMINATION FOR SMALL ANIMALS

WARNING: Anyone who makes a false, fictitious, or fraudulent statement on this document, or uses such document knowing it to be false, fictitious, or fraudulent may be subject to a fine of not more than $10,000 or imprisonment of not more than 5 years or both (18 U.S.C. 1001).

1. TYPE OF ANIMAL SHIPPED (select one only)
[X] Dog [ ] Cat [ ] Other_____
[ ] Nonhuman Primate [ ] Ferret [ ] Rodent

2. CERTIFICATE NUMBER - OFFICIAL USE ONLY

3. TOTAL NUMBER OF ANIMALS
13

4. PAGE
1 of 3

5. NAME, ADDRESS, AND TELEPHONE NUMBER OF OWNER (*CONSIGNOR*)
Asheville Humane Society
14 Forever Friend Lane
Asheville NC 28806

Amanda Rice 828-779-1136

USDA License/or Registration Number (*if applicable*)

6. NAME, ADDRESS, AND TELEPHONE NUMBER OF RECIPIENT AT DESTINATION (*CONSIGNEE*)
St. Hubert's Animal Welfare Center
575 WOODLAND AVE.
MADISON, NJ 07940
(973) 377-2295

7. ANIMAL IDENTIFICATION / **8. PERTINENT VACCINATION, TREATMENT, AND TESTING HISTORY**

NAME, AND/OR TATTOO NUMBER OR OTHER IDENTIFICATION	BREED – COMMON OR SCIENTIFIC NAME	AGE	SEX	COLOR OR DISTINCTIVE MARKS OR MICROCHIP	RABIES VACCINATION [X] 1 YEAR [ ] 2 YEARS [ ] 3 YEARS – Vaccination Date	RABIES VACCINATION – Product	OTHER VACCINATIONS, TREATMENT, AND/OR TESTS AND RESULTS – Date	OTHER VACCINATIONS, TREATMENT, AND/OR TESTS AND RESULTS – Product Type and/or Results
(1) Kelly	Chihuahua	6y	f	000405808347	06/03/2019	Nobivac 1 Merck	06/03/2019	DAPPV and Bordetella
(2) Pogo	Retriever X	4mo	m	126053491360	05/14/2019	Nobivac 1 Merck	05/14/2019	DAPPV and Bordetella
(3) Heidi	Daschund	7y	f	020029639494	05/27/2019	Nobivac 1 Merck	05/27/2019	DAPPV and Bordetella
(4) Cool Ranch Dorito	Hound/Shepherd X	1y	s/f	020029571655	05/14/2019	Nobivac 1 Merck	05/14/2019	DAPPV and Bordetella
(5) Buckshot	Feist	2y	n/m	020029648869	05/24/2019	Nobivac 1 Merck	05/24/2019	DAPPV and Bordetella
(6) ~~Gooey~~ Goosey	Hound	8wk	M	020031081418	~~5/27/19~~ CP	Nobivac 1 Merck	05/27/2019	DAPPV and Bordetella

9. REMARKS OR ADDITIONAL CERTIFICATION STATEMENTS (*WHEN REQUIRED*)

VETERINARY CERTIFICATION: I certify that the animals described in box 7 have been examined by me this date, that the information provided in box 8 is true and accurate to the best of my knowledge, and that the following findings have been made ("X" applicable statements).

[X] I have verified the presence of the microchip, if a microchip is listed in box 7.

[X] I certify that the animal(s) described above and on continuation sheet(s), if applicable, have been inspected by me on this date and appear to be free of any infectious or contagious diseases and to the best of my knowledge, exposure thereto, which would endanger the animal or other animals or would endanger public health.

[X] To my knowledge, the animal(s) described above and on continuation sheet(s) if applicable, originated from an area not quarantined for rabies and has/have not been exposed to rabies.

ENDORSEMENT FOR INTERNATIONAL EXPORT (*IF NEEDED*)

PRINTED NAME OF USDA VETERINARIAN

NAME, ADDRESS, AND TELEPHONE NUMBER OF ISSUING VETERINARIAN
Dr. Chelsea Fogal
14 Forever Friend Lane
Asheville, NC 28806
828-250-6430

LICENSE NUMBER AND STATE
NC 8369

Accredited [X] Yes [ ] No
If yes, please complete below

NATIONAL ACCREDITATION NUMBER
070541

NOTE: International shipments may require certification by an accredited veterinarian.

SIGNATURE OF USDA VETERINARIAN *Apply USDA Seal or Stamp here*

DATE

SIGNATURE OF ISSUING VETERINARIAN
C. Fogal

DATE
6/8/19

APHIS Form 7001
(NOV 2010)

This certificate is valid for 30 days after issuance

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OMB APPROVED
0579-0036
0579-0333

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

UNITED STATES INTERSTATE AND INTERNATIONAL CERTIFICATE OF HEALTH EXAMINATION FOR SMALL ANIMALS

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1. TYPE OF ANIMAL SHIPPED (select one only)
☒ Dog ☐ Cat ☐ Other_____
☐ Nonhuman Primate ☐ Ferret ☐ Rodent

2. CERTIFICATE NUMBER - OFFICIAL USE ONLY

3. TOTAL NUMBER OF ANIMALS
2

4. PAGE
1 of 1

5. NAME, ADDRESS, AND TELEPHONE NUMBER OF OWNER (*CONSIGNOR*)
Rutherford County AC
578 Laurel Hill Drive
Rutherfordton, NC 28139

USDA License/or Registration Number (*if applicable*)

6. NAME, ADDRESS, AND TELEPHONE NUMBER OF RECIPIENT AT DESTINATION (*CONSIGNEE*)
St. Hubert's Animal Welfare Center
575 Woodland Avenue
Madison, NJ 07940
973-377-2295

7. ANIMAL IDENTIFICATION

	NAME, AND/OR TATTOO NUMBER OR OTHER IDENTIFICATION	BREED – COMMON OR SCIENTIFIC NAME	AGE	SEX	COLOR OR DISTINCTIVE MARKS OR MICROCHIP
(1)	Stix	Bluetick	14	M	Tri-color
(2)	Jax	Retriever	14	M	Black
(3)					
(4)					
(5)					
(6)					

8. PERTINENT VACCINATION, TREATMENT, AND TESTING HISTORY

	RABIES VACCINATION (☒ 1 YEAR ☐ 2 YEARS ☐ 3 YEARS)		OTHER VACCINATIONS, TREATMENT, AND/OR TESTS AND RESULTS	
	Vaccination Date	Product	Date	Product Type and/or Results
(1)	6/4/19		5/20/19	6/4/19 DA2PPV, 5/20/19 Bordetella
(2)	6/5/19		6/5/19	DA2PPV, Bordetella
(3)				
(4)				
(5)				
(6)				

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ENDORSEMENT FOR INTERNATIONAL EXPORT (*IF NEEDED*)

PRINTED NAME OF USDA VETERINARIAN

NAME, ADDRESS, AND TELEPHONE NUMBER OF ISSUING VETERINARIAN
Rich Sefcick
50 Slide Rock Way
Fairview, NC 28730

828-505-6663

LICENSE NUMBER AND STATE
7793-NC

Accredited ☒ **Yes** ☐ **No**
If yes, please complete below

NATIONAL ACCREDITATION NUMBER
067955

NOTE: International shipments may require certification by an accredited veterinarian.

SIGNATURE OF USDA VETERINARIAN *Apply USDA Seal or Stamp here*

DATE

SIGNATURE OF ISSUING VETERINARIAN
R Sefcick DVM

DATE
6/10/19

APHIS Form 7001
(NOV 2010)

This certificate is valid for 30 days after issuance.