Georgia Department of Agriculture
19 Martin Luther King Jr Drive SW
Room 104
Atlanta, Georgia 30334

GEORGIA DEPARTMENT OF AGRICULTURE
CERTIFICATE OF VETERINARY INSPECTION

No. CI- 02509

CERTIFICATE VOID 30 DAYS FROM INSPECTION DATE

CONSIGNOR OR SHIPPER	CONSIGNEE OR RECEIVER	DATE ANIMALS INSPECTED	CONSIGNOR'S PREMISES ID.
Stephens Co Humane Society	St Hubert's	5-2-19	
1747 Prince Drive	575 Woodland Ave	DATE CERTIFICATE ISSUED 5-2-19	
Toccoa GA 30577	Madison NJ 07940	No. ANIMALS IN SHIPMENT 25	ENTRY PERMIT NUMBER

X	Species	X	Species	X	Purpose of Movement	X	Area Status	Herd or Flock Status
	Cattle		Ratite		Breeding		Accredited Free TB	Accredited Herd No.
	Horses		Cervidae		Feeding		Modified Accredited TB	Certified Herd No.
	Swine	X	Dogs		Show		Free - Brucellosis	Validated Herd No.
	Goats		Cats		Slaughter		Class A - Brucellosis	Qualified Herd No.
	Sheep		Other	X	Other		Class B - Brucellosis	Monitored Feeder Pig Herd No.
	Poultry							

	Individual ID: Official Eartag, Breed Registration Ear Tattoo or Breed Registration Firebrand	Description of Animal or Registry Name and Number	Age	Sex	Breed	Bruc. Vac. Tattoo	Brucellosis Test Date / Lab / Results	TB Test Inj. / Obs. / 72 Hr. Results	EIA Test Date / Results Include Lab & Accession No.	PRV Test Date / Results	Other Test / Immunization Date / Results	Other Test / Immunization Date / Results
1	AH12718414	Blue	2y	m	Pit		4/22	4/22	4/25	4/30	neg	107.7
2	AH12HHC116	Hank	3m	m	Pit		4/20	4/16	4/17			102.0
3	AH12727C1	Bailey		m	Hound		4/24	4/10	4/11	4/16	neg	101.0
4	AH12092916	Pierre	3m	m	Collie		4/16	4/22	4/24			101.7
5	AH12215C	Nissan	2y		Pit		4/17	4/13	4/14	4/16		101.2
6	AH12721C5	Bizzy	5m	F	Hound		4/24	4/16	4/11			101.1
7	AH12935401	Rocky	4m	F	Pit		4/24	4/20	4/25			102.2
8	AH12737141	Zeta	5m	F	Hound		4/24	4/15	4/11			101.7
9	AH12092923	Rocco	5m	F	Collie		4/20	4/22	4/24			101.5
10	AH12321350	Charlie	2y	m	Terrier		4/20	4/16	4/25	4/17	neg	102.1
11												
12												
13												
14												
15												

CERTIFICATE OF ISSUING VETERINARIAN
I certify as an accredited veterinarian that the described animals have been inspected by me and that they are not showing signs of infectious, contagious and/or communicable disease. The vaccination and results of tests are as indicated on the certificate. To the best of my knowledge, the animals listed on this certificate meet the state of destination and Federal interstate requirements. No further warranty is made or implied.

Accredited Veterinarian (Signature)

Print Name

1627 Hwy 115
Address

USDA Accreditation No.

Clarkesville GA 30523 K752
City, State, Zip

Ga. License No.

CERTIFICATE OF OWNER/AGENT
The animals in this shipment are those certified and listed on this certificate.

Owner/Agent (Signature)

Original and Blue copies to be forwarded to State Veterinarian's Office.
Retain Pink. Yellow copy to accompany shipment.

Georgia Department of Agriculture
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Room 104
Atlanta, Georgia 30334

GEORGIA DEPARTMENT OF AGRICULTURE
CERTIFICATE OF VETERINARY INSPECTION

No. CI- 02508

CERTIFICATE VOID 30 DAYS FROM INSPECTION DATE

CONSIGNOR OR SHIPPER	CONSIGNEE OR RECEIVER	DATE ANIMALS INSPECTED	CONSIGNOR'S PREMISES ID.
St. [illegible] Co Humane Shelter	T. Hulett	5-2-19	
1747 [illegible] Drive	675 [illegible] Ave	DATE CERTIFICATE ISSUED 5-2-19	
Tucker Ga 30084	Winston NT 07540	No. ANIMALS IN SHIPMENT 25	ENTRY PERMIT NUMBER

X	Species	X	Species	X	Purpose of Movement	X	Area Status	Herd or Flock Status
	Cattle		Ratite		Breeding		Accredited Free TB	Accredited Herd No.
	Horses		Cervidae		Feeding		Modified Accredited TB	Certified Herd No.
	Swine		Dogs		Show		Free - Brucellosis	Validated Herd No.
	Goats		Cats		Slaughter		Class A - Brucellosis	Qualified Herd No.
	Sheep		Other		Other		Class B - Brucellosis	Monitored Feeder Pig Herd No.
	Poultry							

	Individual ID: Official Eartag, Breed Registration Ear Tattoo or Breed Registration Firebrand	Description of Animal or Registry Name and Number	Age	Sex	Breed	Bruc. Vac. Tattoo	~~Brucellosis~~ Test Date DAZEP ~~Lab~~ Results	~~TB Test~~ Inj. Bovel ~~Obs.~~ 72 Hr. Results	~~EIA Test~~ Date RV Results Include ~~Lab~~ & ~~Accession No.~~	PRV Test Date Heat-treat test Results	~~Other Test / Immunization~~ Date Heat-treat Results	~~Other Test~~ / Immunization Date Tetra Results
1	AH12641223	Lucy	1y	m	Lab		5/10	4/26	4/2	4/9	neg	102.4
2	AH12312541	Ruby	2y	F	Lab		4/18	4/4	4/11	4/10	neg	102.8
3	AH12107411	Rox	1y	F	[illegible]		4/29	4/15	4/16	4/22	neg	102.7
4	AH12287208	Red	1y	m	Pit		5/1	4/17	4/25	4/17	neg	101.6
5	AH12360414	Raymond	1y	m	[illegible]		5/2	4/18	4/25	4/22	neg	101.4
6	AH12102511	Ramona	1y	F	[illegible]		4/29	4/15	4/16	4/22	neg	102.0
7	AH12445394	Cinnabar	2m	m	Pit		5/4	4/16	4/12			102.8
8	AH12296283	Duke	1y	m	Hound		5/1	4/17	4/25	4/23	neg	101.4
9	AH12954113	Dale	2y	m	Lab		4/26	4/12	4/16	4/15	neg	102.0
10	AH13427916	[illegible]	3y	F	[illegible]		5/3	4/19	4/25	4/25	neg	102.0
11	AH12215555	Toyota	2y	m	Pit		4/17	4/2	4/14	4/10	neg	102.4
12	AH12456271	Tray	2m	m	Pit		5/4	4/16	4/12			102.7
13	AH12447041	Pigeon	2m	m	Pit		4/20	4/16	4/12			101.2
14	AH12456225	Tetra	2m	F	Pit		4/20	4/16	4/12			102.6
15	AH12731166	Bailey	6m	F	Hound		4/24	4/10	4/11			102.7

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Accredited Veterinarian (Signature)

Print Name

[illegible] Hwy 115
Address

USDA Accreditation No.

Clarkesville GA 30523 X712
City, State, Zip

Ga. License No.

CERTIFICATE OF OWNER/AGENT
The animals in this shipment are those certified and listed on this certificate.

Owner/Agent (Signature)

Original and Blue copies to be forwarded to State Veterinarian's Office.
Retain Pink. Yellow copy to accompany shipment.

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

461248

Date Issued 5/3/19
Expiration 30 days after issuance

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

Owner Humphreys Co Humane
Address 112 Young Road
City Waverly
State TN 37185
Telephone No. 931-296-7319

Consignee St. Hubert's Animal
Address 575 Woodland Ave
City Madison
State NJ Zip Code 07940
Telephone No. 973-377-2295

Species	Name	Breed	Sex	Age	Color & Markings	Micro chip ID	Rabies Tag #
Canine	Sheila	Shep mix	F	2y	Tan		LE02801
Canine	Charlotte	Heeler mix	F	3y	Tan		LE02802
Canine	George	Heeler mix	m	1y	Tan		LE02803
Canine	Fitz	Shepherd mix	m	3y	Tan/White		LE02804
Canine	Nelly	Heeler mix	F	4y	Black/White		LE02805
Canine	Chester	Heeler mix	MN	4y	Red/White		LE02806
Canine	Jennie	lab mix	FS	8w	Black		
Canine	Candy	lab mix	FS	8w	Tan		
Canine	Sandy	lab mix	FS	8w	Black/White		
Canine	Rolo	Heeler mix	M	1m	Tan and White		LE02518
Canine	Babbs	Chihuahua mix	FF	2y	Black		LE02293

em
m

Remarks Eyes and ears clear

I certify that I am licensed and accredited in Tennessee and that I personally examined the 9 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	311623	2/25	Killed	5/3/19

Accredited Veterinarian Michael Bailey
Vet Code 059015
Type or Print
Signature Michael Bailey
Address 310 Highway 641 N
City Camden State TN zip 38320
Email Address Vetwork310@gmail
Telephone: 731-213-2555

Distribution:

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

AG-0059 (Rev. 02/15)

RDA's pending

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

461248

Date Issued 5/3/19
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 37185
Telephone No. 931-296-7319

Consignee St. Hubert's Animal
Address 575 Woodland Ave
City Madison
State NJ Zip Code 07940
Telephone No. 973-377-2295

Species	Name	Breed	Sex	Age	Color & Markings	Micro chip ID	Rabies Tag #
Canine	Sheila	Shep mix	F	2y	Tan		1602801
Canine	Charlotte	Heeler mix	F	3y	Tan		1602802
Canine	George	Heeler mix	m	1y	Tan		1602803
Canine	Fitz	Shepherd mix	m	3y	Tan/White		1602804
Canine	Nelly	Heeler mix	F	4y	Black/White		1602805
Canine	Chester	Heeler mix	MN	4y	Red/White		1602806
Canine	Jennie	lab mix	FS	8w	Black		
Canine	Candy	lab mix	FS	8w	Tan		
Canine	Sandy	lab mix	FS	8w	Black/White		
Canine	Rolo	Heeler	M	7m	Tan and White		1602518
Canine	Babbs	Chihuahua	FF	2y	Black		1602293

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m

Remarks Eyes and ears clear

I certify that I am licensed and accredited in Tennessee and that I personally examined the 9 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	311623	2/25	Killed	5/3/19

Accredited Veterinarian Michael Boley Vet Code 059015
Type or Print
Signature Michael Boley
Address 310 Highway 1641 N
City Camden State TN zip 38320
Email Address vetwork310@gmail
Telephone: 731-213-2555

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

AG-0059 (Rev. 02/15)

RDA's pending

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GEORGIA DEPARTMENT OF AGRICULTURE
CERTIFICATE OF VETERINARY INSPECTION

No. CI- 02508

CERTIFICATE VOID 30 DAYS FROM INSPECTION DATE

CONSIGNOR OR SHIPPER	CONSIGNEE OR RECEIVER	DATE ANIMALS INSPECTED	CONSIGNOR'S PREMISES ID.
Stephens Co. Humane Shelter	T. Hulbert	5-2-19	
1747 [illegible] Dr.	675 [illegible] Ave	DATE CERTIFICATE ISSUED 5-2-19	
Toccoa, Ga. 30577	Watkinsville GA 30677	No. ANIMALS IN SHIPMENT 25	ENTRY PERMIT NUMBER

X	Species	X	Species	X	Purpose of Movement	X	Area Status	Herd or Flock Status
	Cattle		Ratite		Breeding		Accredited Free TB	Accredited Herd No.
	Horses		Cervidae		Feeding		Modified Accredited TB	Certified Herd No.
	Swine		Dogs		Show		Free - Brucellosis	Validated Herd No.
	Goats		Cats		Slaughter		Class A - Brucellosis	Qualified Herd No.
	Sheep		Other		Other		Class B - Brucellosis	Monitored Feeder Pig Herd No.
	Poultry							

	Individual ID: Official Eartag, Breed Registration Ear Tattoo or Breed Registration Firebrand	Description of Animal or Registry Name and Number	Age	Sex	Breed	Bruc. Vac. Tattoo	Brucellosis Test Date / Lab / Results	TB Test Inj. / Obs. / 72 Hr. Results	EIA Test Date / Results Include Lab & Accession No.	PRV Test Date / Results	Other Test / Immunization Date / Results	Other Test / Immunization Date / Results
1	A41254772	Lucy	1y	m	Lab		5/10	4/26	4/2	4/4	neg	102.6
2	A41231254	Ruby	2y	F	Lab		4/18	4/4	4/11	4/10	neg	102.8
3	A41210741	Roxy	1y	F	[illegible]		4/29	4/15	4/16	4/22	neg	102.2
4	A41328278	Bert	1y	m	Mut		5/1	4/17	4/25	4/17	neg	101.6
5	A41231044	Raymond	1y	m	[illegible]		5/2	4/18	4/25	4/22	neg	101.4
6	A41210251	Ramona	1y	F	[illegible]		4/29	4/15	4/16	4/22	neg	102.0
7	A41244539	[illegible]	5m	m	Mut		5/4	4/16	4/12			100.8
8	A41227652	Dustin	1y	m	Hound		5/1	4/17	4/25	4/23	neg	101.4
9	A41295413	Duke	2y	m	Lab		4/26	4/12	4/16	4/15	neg	102.0
10	A41343794	[illegible]	3y	F	[illegible]		5/3	4/19	4/25	4/25	neg	102.0
11	A41221555	Toyota	2y	m	Mut		4/17	4/2	4/4	4/10	neg	102.4
12	A41245621	Troy	5m	m	Mut		5/4	4/16	4/12			102.7
13	A41244701	Dalton	5m	m	Mut		4/26	4/16	4/12			101.2
14	A41245225	Tater	5m	F	Mut		4/20	4/16	4/12			102.6
15	A41273116	Bailey	5m	F	Hound		4/24	4/10	4/11			102.7

CERTIFICATE OF ISSUING VETERINARIAN

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Accredited Veterinarian (Signature)

Print Name

1627 Hwy 115
Address

USDA Accreditation No.

Clarkesville GA 30523
City, State, Zip

Ga. License No. X752

CERTIFICATE OF OWNER/AGENT

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Owner/Agent (Signature)

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Room 104
Atlanta, Georgia 30334

GEORGIA DEPARTMENT OF AGRICULTURE
CERTIFICATE OF VETERINARY INSPECTION

No. CI- 02509

CERTIFICATE VOID 30 DAYS FROM INSPECTION DATE

CONSIGNOR OR SHIPPER	CONSIGNEE OR RECEIVER	DATE ANIMALS INSPECTED	CONSIGNOR'S PREMISES ID.
Stephens Co. Humane Shelter	St Huberts	5-2-19	
1747 Ernie Drive	575 Woodland Ave	DATE CERTIFICATE ISSUED: 5-2-19	
Toccoa GA 30577	Madison NJ 07940	No. ANIMALS IN SHIPMENT: 25	ENTRY PERMIT NUMBER

X	Species	X	Species	X	Purpose of Movement	X	Area Status	Herd or Flock Status
	Cattle		Ratite		Breeding		Accredited Free TB	Accredited Herd No.
	Horses		Cervidae		Feeding		Modified Accredited TB	Certified Herd No.
	Swine	X	Dogs		Show		Free - Brucellosis	Validated Herd No.
	Goats		Cats		Slaughter		Class A - Brucellosis	Qualified Herd No.
	Sheep		Other	X	Other		Class B - Brucellosis	Monitored Feeder Pig Herd No.
	Poultry							

	Individual ID: Official Eartag, Breed Registration Ear Tattoo or Breed Registration Firebrand	Description of Animal or Registry Name and Number	Age	Sex	Breed	Bruc. Vac. Tattoo	Brucellosis Test-Date DAZPP Lab Results	TB-Test Inj. Rabies Obs. 72 Hr. Results	EIA Test Date RV Results Include Lab & Accession No.	PRV Test Date HW Results	Other Test / Immunization Date HW Results	Other Test / Immunization Date Temp Results
1	A41271814	Blue	2y	m	Beagle		4/22	4/22	4/25	4/12m	neg	102.7
2	A41244496	Yoash	3y	m	Pit		4/20	4/16	4/12			102.0
3	A41272201	Porky		m	Hound		4/24	4/10	4/11	4/16	neg	101.0
4	A41209296	Pierre	3m	m	Collie		4/16	4/2	4/4			101.7
5	A41221560	Nissan	7y		Pit		4/17	4/3	4/4	4/10	neg	101.2
6	A41272155	Bizzy	5m	F	Hound		4/24	4/10	4/11			[illegible]
7	A41263590	Roberta	4m	F	Pit		4/4	4/20	4/25			102.2
8	A41272219	Reta	5m	F	Hound		4/24	4/10	4/11			[illegible]
9	A41209393	Rosers	3m	F	Collie		4/30	4/2	4/4			101.5
10	A41321380	Charlie	7y	m	Terrier		4/30	4/16	4/25	4/17	neg	102.1
11												
12												
13												
14												
15												

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Accredited Veterinarian (Signature)

Print Name

16637 Hwy 115
Address

USDA Accreditation No.

Clarkesville GA 30523 — 5752
City, State, Zip — Ga. License No.

CERTIFICATE OF OWNER/AGENT
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Owner/Agent (Signature)

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AL-S 0041283

SMALL ANIMAL

HEALTH CERTIFICATE

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

Date Issued 5-7-19

CONSIGNOR OR SHIPPER Calhoun Co. Humane CONSIGNEE OR PURCHASER MC SPCA

ORIGIN 1201 Parkwood Dr DESTINATION 260 Wall Street

COMPLETE PHYSICAL ADDRESS FOR CONSIGNOR
Anniston, AL 36201
256-453-2130

COMPLETE PHYSICAL ADDRESS FOR CONSIGNEE
Eatontown, NJ 07724
732-542-0040

DESCRIPTION OF ANIMALS

Species	Breed	Sex	Age	Color or Markings	Rabies Tag No.
K9 – Venus	mix	F	3 yrs	Chocolate	38497
K9 – Camp	Mix	M	4 yrs	Brindle / White	38498
K9 – Rain	Mix	F	1.5 yrs	Black / White	38499
1	1	1	1	1	1

VACCINATION DATA

	TYPE (Circle One)	Date
Rabies	MLV [redacted] All	5-7-19
DHLP	MLV – K Venus 4-10-19 Camp 4-1-19 Rain 4-2019	
FVRCP	MLV – K	
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 [redacted] DVM Veterinary Accreditation No. 042520

Printed Signature [redacted] Address 725 Greenbriar Dr Anniston, AL 36207

Telephone No. 256-237-9585

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

Calhoun County Humane Society
Canine Shelter Record

HW +
HW –
Kennel _____

1. Intake Data

Intake Date: 4-10-19 ☐ AC ☒ ~~OS~~ ☐ AB ☐ VET City: Anniston

Name: Venus ☒ Canine ☐ Puppy ☑ Adult Sex: ☒ Female ☐ Male

Approximate Age: 3yrs Weight: 43# Breed: Mix

Description: Croc / tan

Check for identification: ☒ Microchip scan ☐ Tattoo check ☐ Ear tip

☐ Tag information: _____

Is the animal altered? ☒ Yes ☐ No If unknown, check for spay scar.

Initial Kennel Assignment/Location: K-32

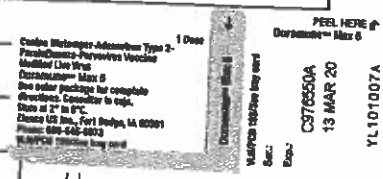
Comments: _____

2. Medical Assessment at Intake (Check only if noted)

☐ Eye or nose discharge	☐ Cough or sneeze	☐ Conjunctivitis
☐ Ulcers in mouth/nose	☐ Patch or circular hair loss	☐ Vomiting
☐ Diarrhea	☐ Fleas and ticks	☐ Tangled/Matted Coat
☐ Needs Nails Trimmed	☐ Loose/decayed tooth/teeth	☐ Other:

3. Health Care Provided

Puppy/Dog	Date & Outcome
☒ DHLP + CPV + CV (3x's for Puppies)	Date: 4-10-19 Initials: CC
☒ ~~Strongid~~ Panacur 3 days	Date: 4-10-19 Initials: CC
☐ Spay/Neuter	Date: Initials:
☑ Rabies Tag # 38497	Date: 5-7-19 Initials: SH/GAC
☐ Bordetella	Date: Initials:
☒ Heartworm Test Neg	Date: 4-11-19 Initials: RP AH
☒ Heartworm Prevention	Date: 4-12-19 Initials: RP
☒ Other Advantage	Date: 4-10-19 Initials: CC



4-10-19 CC

4. Outcome

☐ Adoption – PetSmart ☐ Yes ☐ No	Date:	
☐ Rescue/Transfer	Group:	Date:
☐ Euthanasia – Reason:		Date:
☐ Died – Reason:		Date:
☐ MIA – Reason:		Date:

CERTIFICATE OF VACCINATION

Date of Rabies Vaccination: 05-07-19
Next Rabies Vaccination On: 05-06-20

Certificate No: 15524
Previous Rabies Vaccination: 38203

VETERINARY CLINIC
Greenbrier Animal Clinic
725 Greenbrier-Dear
Anniston, AL 36207
(256) 237-9585

OWNER OF ANIMAL
Animal Shelter
1201 Parkwood Drive
Anniston, AL 36201
County:

This is to certify...

THAT I HAVE VACCINATED AGAINST RABIES THE ANIMAL DESCRIBED BELOW.

Patient information...

PATIENT: Puppies - AHS Venus
SPECIES: Canine
SEX: F

TAG NO: 38497
WEIGHT: 0.00
AGE: 3 years

Color and markings...

Choc/Tan

Signed William H. Brom, DVM

William Brom, DVM

License: 3046

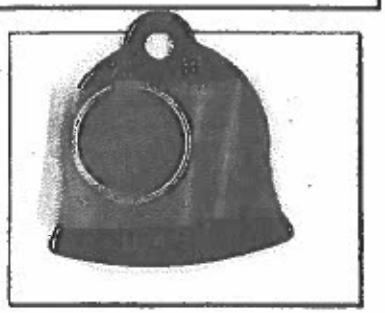
Vaccinations done...

05-07-19 WB Rabies, Canine Annual

Rabies Vaccine Information...

MFG BY: ZOETI
LOT EXP: 10/02/20

SER.NO: 221611
ADM: SubQ



Calhoun County Humane Society
Canine Shelter Record

HW +
HW –
Kennel _____

1. Intake Data

Intake Date: 4-1-19 ☑ AC ☐ OS ☐ AB ☐ VET City: J'Ville

Name: Camo ☑ Canine ☐ Puppy ☑ Adult Sex: ☐ Female ☑ Male

Approximate Age: 4yrs Weight: 60 Breed: Mix

Description: Tan/Fawn Brindle Iwht

Check for identification: ☐ Microchip scan ☐ Tattoo check ☐ Ear tip

☐ Tag information: _____

Is the animal altered? ☐ Yes ☒ No If unknown, check for spay scar.

Initial Kennel Assignment/Location: _____

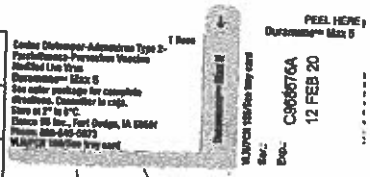
Comments: _____

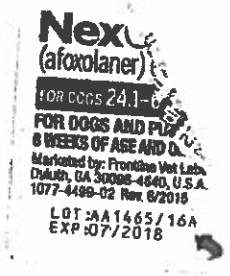
2. Medical Assessment at Intake (Check only if noted)

☐ Eye or nose discharge	☐ Cough or sneeze	☐ Conjunctivitis
☐ Ulcers in mouth/nose	☐ Patch or circular hair loss	☐ Vomiting
☐ Diarrhea	☐ Fleas and ticks	☐ Tangled/Matted Coat
☐ Needs Nails Trimmed	☐ Loose/decayed tooth/teeth	☐ Other:

3. Health Care Provided

Puppy/Dog	Date & Outcome
☒ DHLP + CPV + CV (3x's for Puppies)	Date: 4-1-19 Initials: AH
☒ ~~Strongid~~ Panacur 3 days	Date: 4-1-19 Initials: AH
☐ Spay/Neuter	Date: Initials:
☑ Rabies Tag# 38498	Date: 5-7-19 Initials: SH/BAC
☐ Bordetella	Date: Initials:
☒ Heartworm Test Neg	Date: 4-11-19 Initials: RP
☒ Heartworm Prevention Ivermectin	Date: 4-12-19 Initials: RP
☑ Other Nexgard	Date: 4-20-19 Initials: AH/RP





4. Outcome

☐ Adoption – PetSmart ☐ Yes ☐ No	Date:	
☐ Rescue/Transfer	Group:	Date:
☐ Euthanasia – Reason:		Date:
☐ Died – Reason:		Date:
☐ MIA – Reason:		Date:

CERTIFICATE OF VACCINATION

Date of Rabies Vaccination: 05-07-19
Next Rabies Vaccination On: 05-06-20

Certificate No: 15525
Previous Rabies Vaccination: 38497

VETERINARY CLINIC
Greenbrier Animal Clinic
725 Greenbrier-Dear
Anniston, AL 36207
(256) 237-9585

OWNER OF ANIMAL
Animal Shelter
1201 Parkwood Drive
Anniston, AL 36201
County:

This is to certify...

THAT I HAVE VACCINATED AGAINST RABIES THE ANIMAL DESCRIBED BELOW.

Patient information...

PATIENT: Puppies - AHS Camo
SPECIES: Canine
SEX: M

TAG NO: 38498
WEIGHT: 0.00
AGE: 0 4 years

Color and markings...

Reverse Brindle/White

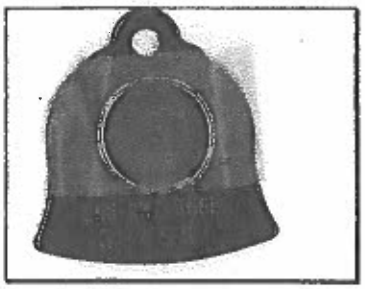
Signed William H. Brom, DVM

William Brom, DVM

License: 3046

Vaccinations done...

05-07-19 WB Rabies, Canine Annual



Rabies Vaccine Information...

MFG BY: ZOETI
LOT EXP: 10/02/20

SER.NO: 221611
ADM: SubQ

Calhoun County Humane Society
Canine Shelter Record

HW +
HW –
Kennel _____

1. Intake Data

Intake Date: 4-20-19 ☐ AC ☐ OS ☒ AB ☐ VET City: At Gate

Name: Rain ☑ Canine ☐ Puppy ☑ Adult Sex: ☑ Female ☐ Male

Approximate Age: 1 1/2 yrs Weight: 39 Breed: mixed

Description: Black with white markings neck chest and toes

Check for identification: ☒ Microchip scan ☒ Tattoo check ☒ Ear tip

☐ Tag Information: None

Is the animal altered? ☐ Yes ☑ No If unknown, check for spay scar.

Initial Kennel Assignment/Location: K-15

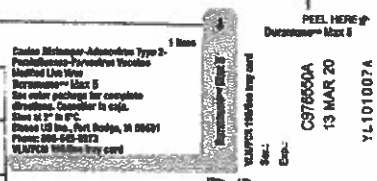
Comments: _____

2. Medical Assessment at Intake (Check only if noted)

☐ Eye or nose discharge	☐ Cough or sneeze	☐ Conjunctivitis
☐ Ulcers in mouth/nose	☐ Patch or circular hair loss	☐ Vomiting
☐ Diarrhea	☐ Fleas and ticks	☐ Tangled/Matted Coat
☐ Needs Nails Trimmed	☐ Loose/decayed tooth/teeth	☐ Other:

3. Health Care Provided

Puppy/Dog	Date & Outcome
☑ DHLP + CPV + CV (3x's for Puppies)	Date: 4-20-19 Initials: RP
☑ Strongid Panacur 4-20-19 - 4-25-19	Date: RP Initials:
☐ Spay/Neuter	Date: Initials:
☑ Rabies Tag # 38499	Date: 5-7-19 Initials: SH/GA
☐ Bordetella	Date: Initials:
☒ Heartworm Test Negative	Date: 4-25-19 Initials: RP
☑ Heartworm Prevention Ivermectin	Date: 4-20-19 Initials: RP
☒ Other Advantix	Date: 5-7-19 Initials: AH



4-20-19 - RP

4. Outcome

☐ Adoption – PetSmart ☐ Yes ☐ No	Date:	
☐ Rescue/Transfer	Group:	Date:
☐ Euthanasia – Reason:		Date:
☐ Died – Reason:		Date:
☐ MIA – Reason:		Date:

CERTIFICATE OF VACCINATION

Date of Rabies Vaccination: 05-07-19
Next Rabies Vaccination On: 05-06-20

Certificate No: 15526
Previous Rabies Vaccination: 38498

VETERINARY CLINIC
Greenbrier Animal Clinic
725 Greenbrier-Dear
Anniston, AL 36207
(256) 237-9585

OWNER OF ANIMAL
Animal Shelter
1201 Parkwood Drive
Anniston, AL 36201
County:

This is to certify...

THAT I HAVE VACCINATED AGAINST RABIES THE ANIMAL DESCRIBED BELOW.

Patient information...

PATIENT: Puppies - AHS Rain
SPECIES: Canine
SEX: F

TAG NO: 38499
WEIGHT: 0.00
AGE: 1.5 years

Color and markings...

Black w white markings neck, chest + toes.

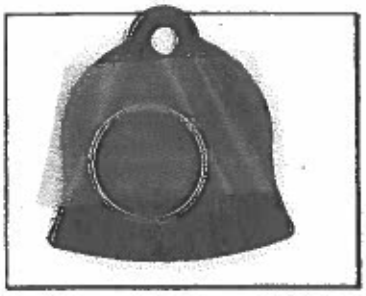
Signed William H. Brom, DVM

William Brom, DVM

License: 3046

Vaccinations done...

05-07-19 WB Rabies, Canine Annual



Rabies Vaccine Information...

MFG BY: ZOETI
LOT EXP: 10/02/20

SER.NO: 221611
ADM: SubQ