Kansas Department of Agriculture Division of Animal Health 1320 Research Park Drive Manhattan, KS 66502 (785) 564-6601

KANSAS CERTIFICATE OF VETERINARY INSPECTION

Certificate Number 48-5806-1695050955

Contact State of Destination for Movement Requirements and Certificate Validity FOR FOREIGN SHIPMENTS (Outside United States or Leaving United States) USE FEDERAL FORM

OFFICIAL USE ONLY: The Veterinarian issuing this certificate is accredited and has been authorized to inspect animals and issue certificates.

ENTRY PE	RMIT #:																					
INSPECTION DATE: 09/18/2023						SHIPMENT DATE:								∩Lar	rge Animal							
CONSIGNOR - Contact Person at Origin					CONSIGNEE - Contact Person at Destination										CARRIER (Transporter)							
First Name Last Name			Name	е		First Name				Last Name				Busine	Business Name							
Brittni					11 -	Diane			Muren			AND/OR										
Business Name					Business Name									Physical Address								
Acarf						Mid American Bully Breed Rescue																
Physical Address of Animals					Physical Address of Animals									City			State Z	Zip Code	Phone Nu	mber		
305 E Hwy 54					9708 Brooklane St																	
			Zip Code				City			State			Cou						7	Purpose of Movement		
			66749				Kansas City			MO	_	64133			Car							
Phone Num	Location ID	ation ID#				Number			Loca	ation ID#	ı ID#			erstate		Intras	state					
(620	[[(816) 225] []										
Consignor's Address (if different)						Consignee's Address (if different) Print Reconsigned								t								
Weather Acc Statement	limation																					
SPECIES	# OF ANIMALS	DESCRIPTION / BREED / MICROCHIP				AGE SEX			RABIE: VACC DATE	ВОС	ABIES OSTER OUE			S SERIAL MBER	OTHER TESTS, VACCINATIONS/TREATMENT. PLEASE LIST DATE & PRODUCT USED			NT.				
Canine	1	SHIEMI/ D-4506-23/PIT BULL/ BLACK				9	W	F							TOO YOUNG			G FOR RABIES			Delete	
Canine	1	HOYORI/ D-4508-23/PIT BULL/ BLACK				9	w	F								TOO YOUNG FOR RABIES Cop				Сору	Delete	
Canine	1	ALEXANDER/ D-4002-23/ PIT BULL/ BLACK				9	W	М								TOO YOUNG FOR RABIES					Delete	
Canine	1	YATO/ D-4504-23/ PIT BULL/ BLACK				9	W	М							TOO YOUNG FOR RABIES Copy D					Delete		
TOTAL	4	Add New R	ow Delete La	ast Row																		
OWNER/AG "The animals i certified to and	n this shipr	ment are tho	se signs of	infectio	us, contagiou	us and	d/or co	ommunicat	ole disea	se (exce	ept whe	ere noted)). The	oove describe vaccinations interstate red	and resul	ts of tests	s are ii	ndicated on	the certifica	te. To the I		
Date				Date 09/18/2023 P				Printed Name Leann Flowers, Dvm Phone (620)							365-396	Email rbvs@redbarnvet.com						
DATE	Address	Address 1520 1300 St								City lola		_		State KS Zip 66749								
SIGNATURE	Signati	ure _	ation # 0	0 7	5 1 7	State of	License	e KS	Lie	cense #	0 0	0 5 8 0 6					IFICATE AI					
Save Form	n Pri	int Form	Submit by E	Email																		

Version 3.2