



West Virginia
Department of Agriculture
 Animal Health Division
 1900 Kanawha Blvd., E.
 Charleston, WV 25305
 304-558-2214

CERTIFICATE OF VETERINARY INSPECTION 6/16/22
GOOD FOR 30 DAYS Date: _____

No 93325

INTERSTATE ☒

INTRASTATE ☐

Page 1 of 1 Pages

1. Seller/Exhibitor/Cosigner/Owner:

Name: Stacy Woyles Phone: 304-449-1717
 Address: 155 Mahogany Ln.
Farmersville WV 26570
 Premise ID # _____

2. Purchaser/Name of Show/Cosignee:

Name: Dave & Christine Mow Phone: 734-883-9114
 Address: 3952 Hickory Hollow Dr.
Ypsilanti, MI 48197
 Premise ID # _____

3. West Virginia Status:

Brucellosis
☒ Free
☐ Class A ☐ Class B
Tuberculosis
☒ Free
☐ Class A ☐ Class B

6. Species:

One form per species

☐ Cattle ☒ Canine
☐ Sheep ☐ Horses
☐ Goats ☐ Feline
☐ Poultry ☐ Swine
☐ Other _____

7. Herd of Flock Status

Test Dates

Accredited herd No. _____
 Certified herd No. _____
 Qualified herd No. _____
 Validated Herd No. _____
 Other _____

8. Purpose of Movement:

☐ Breeding ☒ Pet
☐ Feeding ☐ Exhibition
☐ Slaughter
☐ Other _____

9. Carrier:

☐ Air
☒ Truck/Auto
☐ Rail
☐ Water

4. Market: _____

5. County of Origin: Mason

10. Permit No. (if required): _____

11. Individual Animal Identification Test Date:

12. Brucellosis Test

13. Tuberculosis Test

14. EIA Test

15. Other Tests and Vaccination Status

Ear Tag Numbers, Tattoo or Other Permanent ID	Registration No. or Description, Color	AGE	SEX	BREED	Date of Test	Vacc. Tattoo Symbol	Lab Results	Observation Date	72 Hour Results	Date	Accession No.	Results	Temp.	Date	Product	Results
Malepp Collar	1. Black	1/2	Ma	Lab	14.5#									9/16/22	DAPP	Negative
	2. <u>155 Mahogany Ln.</u>															
	3.															
	4.															
	5.															
	6.															
	7.															
	8.															

RECEIVED

By HarrisC24 at 9:02 am, Jun 28, 2022

APPROVED

Only if in compliance with state of destination requirements

JUN 22 2022

Office of the State Veterinarian
 WV Department of Agriculture

Michigan Department of
AGRICULTURE
 & Rural Development
 Reviewed by Colleen Phillipich

16. Veterinary Certification: "I certify, as an accredited veterinarian, that the above described animals have been inspected by me and that they are not showing signs of infectious, contagious, and/or communicable disease (except where noted). 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."

Signature of Issuing Veterinarian: Vicky Soles DVM Date: 6/16/22
 Printed Name of Veterinarian: VICKY SOLES DVM Phone: 724-447-2282 License#: 9026
 Full Address: 453 NED RIDGE RD
NEW FREEPORT PA 15352

17. State Certification

Kent A. Ferrel
 Commissioner of Agriculture