

MISSOURI CERTIFICATE OF VETERINARY INSPECTION

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.

Certificate Number

43138001672862769

ENTRY PERMIT #

INSPECTION DATE: 01/04/2023				SHIPMENT DATE:				<input type="radio"/> Large Animal <input checked="" type="radio"/> Small Animal					
CONSIGNOR - Contact Person at Origin				CONSIGNEE - Contact Person at Destination				CARRIER (Transporter)					
First Name		Last Name		AND/OR		First Name		Last Name		AND/OR		Business Name	
JACKIE		GREEN		AND/OR		JACKIE		CURREY		AND/OR			
Business Name				Business Name				Physical Address					
Physical Address of Animals				Physical Address of Animals				City State Zip Code Phone Number					
14455 HWY B				116 CLAYTON CT.									
City		State		Zip Code		County		City		State		Zip Code Phone Number	
LEBANON		MO		65536		LACLEDE		PEORIA		IL		61611	
Phone Number		Location ID#		Phone Number		Location ID#		Transport Method		Purpose of Movement			
(417) 991-1071								<input checked="" type="checkbox"/> Interstate <input type="checkbox"/> Intrastate		SALE			
Consignor's Address (if different)				Consignee's Address (if different)				<input type="checkbox"/> Print Reconsigned					

Weather Acclimation Statement THIS ANIMAL IS ACCLIMATED TO TEMPERATURES UP TO 90 DEGREES AND DOWN TO 10 DEGREES

SPECIES	# OF ANIMALS	DESCRIPTION / BREED / MICROCHIP	AGE	SEX	RABIES VACC DATE	RABIES BOOSTER DUE	RABIES TAG NUMBER	RABIES SERIAL NUMBER	OTHER TESTS, VACCINATIONS/TREATMENT. PLEASE LIST DATE & PRODUCT USED
Canine	1	FRENCH BULLDOG	11W	M					
TOTAL	1								

Date Field

OWNER/AGENT STATEMENT "The animals in this shipment are those certified to and listed on this certificate." DATE SIGNATURE	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 vaccinations and results of tests are 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.									
	Date 01/04/2023		Printed Name DR. DAVID SIKES				Phone (417) 657-2200		Email customerservice@lebanonmovet.com	
	Address 926 LYNN ST.				City LEBANON				State MO Zip 65536	
	USDA Accreditation # 013800		State of License MO		License # 2008016048					
	Signature David B. Sikes Digitally signed by David B. Sikes Date: 2023.01.04 14:06:09 -06'00'									