

# **CERTIFICATE OF VETERINARY INSPECTION** **INDIANA STATE BOARD OF ANIMAL HEALTH**

Discovery Hall

1202 East 38th Street, Suite 100

Indianapolis, IN 46205-2898

Telephone: (317) 544-2400

FAX: (317) 974-2011

**DISTRIBUTION**

White - Original with shipment

Blue - Duplicate to State Office\*

Pink - Triplicate to State Office\*

Yellow - To owner or seller

\* Forward to BOAH within ten (10) days.

**LIMIT: ONE SPECIES PER CERTIFICATE**  
 (Covering Canine, Feline, Avian and other Small Animals Only)

ENTRY PERMIT NUMBER

**No. G 419407****DATE ANIMALS INSPECTED**

2-17-23

**DATE CVI ISSUED**

2-17-23

**CERTIFICATE ISSUED FOR**

- ☒ Sale / Owner Change  
☐ Show ☐ Moving  
☐ Vacation ☐

Name of owner or seller

Marjorie Hoene

Origin address (number and street)

17403 S. 500 W.

City, state, and ZIP code

Seymour IN 47274

Telephone number

(812) 521-1967

Indiana county

Kartolomew

Owner / Buyer / Show

Ashley Taboada

Destination address (number and street)

10457 SW 47th Ave.

City, state, and ZIP code

Ocala, FL 34476

954-504-1101

**DESCRIPTION OF ANIMALS**SPECIES: ☐ Canine ☐ Feline ☐ Avian ☐ Other: \_\_\_\_\_

ID Type and Number	Age	Breed	Sex	Color Or Markings
	3yr	German Shepherd dog	F	Black

Other vaccinations or tests - type and date

N/A

**RABIES IMMUNIZATION DATA**

Is the area from which shipment originates under quarantine for rabies?

☐ Yes ☒ No

Tag Number	Rabies Vaccine Product Name	Type	Vacc. Date
230302	RebVax 1	KV	2/17/23

**ACCLIMATION STATEMENT**

To the best of my knowledge, the above animal(s) in this shipment is (are) acclimated to air temperatures lower than 50 degrees F; but not lower than 20 degrees F.

Signature of veterinarian

**CERTIFICATION OF OWNER / AGENT**

"I certify that the animals in this shipment are those certified to and listed on this certificate and that the identification and ages of the animals listed are correct."

Signature of owner / agent

Date of signature (month, day, year)

**CERTIFICATION OF VETERINARIAN**

"I certify, as an accredited veterinarian, that the above-described animals have been inspected by me on the above stated inspection date and that they are not showing signs of infectious, contagious, and/or communicable diseases (except where noted). The vaccinations 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 veterinarian

Address (number and street)

1005 S. 4th Street Rd.

Veterinarian license code

City, state, and ZIP code

Seymour IN 47274

**STATE VETERINARIAN****RECEIVED**

FEB 23 2023

**INDIANA STATE BOARD OF ANIMAL HEALTH****COMPLETE ALL INFORMATION - TYPE OR PRINT FORM - PRESS FIRMLY**

FOR ALL INTERNATIONAL SHIPMENTS PLEASE CONTACT: USDA - APHIS 5685 Lafayette Road, Suite 400, Indianapolis, IN 46254 (317) 347-3100