OREGON 92-S

## OFFICIAL CERTIFICATE OF VETERINARY INSPECTION

- FOR SMALL PET ANIMALS -

356614

Please type or print all information

	For small pet a <u>NOT</u> for zo	nimals: dogs, o o animals; wil	cats, pet birds, rabbit dlife, poultry, or other	- Certificate is valid for 30 days from date of inspection -								
Name Scott & Kathy Hamilton  Address  40608 NW Murtaugh Rd.  City State Zip  North Plains, OR 97133  Phone  503-318-5259  Origin address, if different from above							Name Puring Farms Scott & Kathy Hamilton  Address  Scott & Kathy Hamilton  Address  Scott & Kathy Hamilton  City State Zip  Summit, Mo 63039  Phone 503-318-5259  Destination address, if different from above					
	Permit Number (If Required)  Shipping Date 9-27-23 Number of Animals 2					RABIES VACCINATION  1) The Compendium of Animal Rabies Control recommends initial vaccination at 3 months  2) Many states require rabies vaccination annually, regardless of vaccine used.					Other tests or vaccinations.	
NO	Name, tattoo, or other individual id	Species	Breed	Age	Sex	Date Injected	Date Expires	Product & Manufacturer	Serial Number	Rabies Tag Number	Include lab name & date or test(s)	
MATI	Miss Kitty	Canine	Australian Cattle Dog	103	FS	7.24.23	724.26	Rabies Imrab3TF BI	18568			
NFOR	Tommy	Canine	Australian Cattle Day	25	M	8.1).ZZ	8-11-25	Ravies Nobivac 3 Zoctis	562841			
ANIMAL INFORMATION											37	
Veterinarian's Name (Print)  Cayon ne Brillown  Clinic Name  Alpha Dog? Lat Hospital  Address  17335 SW TV Highway  City State Zip  Alpha, OR 97006  Phone  503: (449 - 51011					Indicated, and to the best of my knowledge meets both state of destination and federal interstate movement regulations. No other warranty is made of implied. To the best of my knowledge, none has been exposed to rabies.				THE ST NARIAN autho	S accredited and is authorized to inspect animals and issue certificates.		