RABIES VACCINATION CERTIFICATE

ADAPTED NASPHV FORM 51

Tag # 7970

mer's Name Address

LastName Cherokee Village		FirstName		Telephone		
			Animal Control		(870) 994-4445	
Number Street 1531 Hwy 289 N		City State Cherokee Village AR		ZIP 72529		
Species: Dog	Sex: Female	Altered: Yes	Age: 12 months or older	Size: 20-50 lbs	Predominant Breed: Colors: Hound X Blk/Tan	
					Name: Imogene	
Date Vaccinated: 7 /22/2016		Lic_Va	Producer: NOB Lic_Vacc 1 yr. Lic./Vacc.		Veterinarian's # 2888 License No. Solio Dym	
Vaccination Expires:		1 yı. Lı			Signature Nanci Solis, DVM	
7 /22/2017		120623 Vaccine Serial (Lot) No		Address 7020 White Drive Charlotte, AR 72522 (870) 793-3337		

