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No dog, cat, nonhuman primate, or additional kinds or classes of animals designated by USDA regulation shall be delivered to any intermediate handler or carrier for transportation in commerce, unless accompanied by a health certificate executed and issued by a licensed veterinarian (7 U.S.C. 21.43g; CFR, Subchapter A, Part 2).

OMB APPROVED
0579-0036
0579-0333

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
UNITED STATES INTERSTATE AND INTERNATIONAL
CERTIFICATE OF HEALTH EXAMINATION
FOR SMALL ANIMALS

WARNING: Anyone who makes a false, fictitious, or fraudulent statement on this document, or uses such document knowing it to be false, fictitious, or fraudulent may be subject to a fine of not more than \$10,000 or imprisonment of not more than 5 years or both (18 U.S.C. 1001).

5. NAME, ADDRESS, AND TELEPHONE NUMBER OF OWNER (CONSIGNOR)

Animal Rescue Fund of MS
C/O Elizabeth Jackson
395 W Mayes St
Jackson MS 39213
601-750-2740

6. NAME, ADDRESS, AND TELEPHONE NUMBER OF RECIPIENT AT DESTINATION (CONSIGNEE)

SOSARL
C/O Emma Dawley
33 Prospect Ave
Wakefield RI 02879
401-603-6702

1. TYPE OF ANIMAL SHIPPED (select one only)
☒ Dog ☐ Cat ☐ Other _____
☐ Nonhuman Primate ☐ Ferret ☐ Rodent

3. TOTAL NUMBER OF ANIMALS 1
4. PAGE 1 of 1

7. ANIMAL IDENTIFICATION

NAME AND/OR TATTOO NUMBER OR OTHER IDENTIFICATION	BREED - COMMON OR SCIENTIFIC NAME	AGE	SEX	COLOR OR DISTINCTIVE MARKS OR MICROCHIP
(1) George # 981020019649961	Shepherd Mix	9m	M(n)	Red Brown
(2)				
(3)				
(4)				
(5)				
(6)				

8. PERTINENT VACCINATION, TREATMENT, AND TESTING HISTORY

RABIES VACCINATION			OTHER VACCINATIONS, TREATMENT, AND/OR TESTS AND RESULTS	
Vaccination Date	Product	Date	Product Type and/or Results	
5/17/2017	ZOE KV SN157455A	11/27/2017	Fecal Flotation Negative	

9. REMARKS OR ADDITIONAL CERTIFICATION STATEMENTS (WHEN REQUIRED)

VETERINARY CERTIFICATION: I certify that the animals described in box 7 have been examined by me this date, that the information provided in box 8 is true and accurate to the best of my knowledge, and that the following findings have been made ("X" applicable statements).

☒ I have verified the presence of the microchip, if a microchip is listed in box 7.

☒ I certify that the animal(s) described above and on continuation sheet(s), if applicable, have been inspected by me on this date and appear to be free of any infectious or contagious diseases and to the best of my knowledge, exposure thereto, which would endanger the animal or other animals or would endanger public health.

☒ To my knowledge, the animal(s) described above and on continuation sheet(s) if applicable, originated from an area not quarantined for rabies and has/have not been exposed to rabies.

ENDORSEMENT FOR INTERNATIONAL EXPORT (IF NEEDED)
PRINTED NAME OF USDA VETERINARIAN

Sylvia Y Stewart DVM
Monroe Street Animal Clinic
607 Monroe St
Jackson MS 39202
601-966-5074

LICENSE NUMBER AND STATE
License # 630 MS

Accredited ☐ Yes ☒ No
If yes, please complete below
NATIONAL ACCREDITATION NUMBER

SIGNATURE OF USDA VETERINARIAN Apply USDA Seal or Stamp here DATE

NOTE: International shipments may require certification by an accredited veterinarian.
SIGNATURE OF ISSUING VETERINARIAN

DATE
11/27/2017

CERTIFICATE OF VACCINATION

Date of Vaccination: 05-17-17
Next Vaccination on: 05-17-18

Certificate No. 0
Previous Vaccination:

VETERINARY CLINIC

Monroe Street Animal Clinic
607 Monroe Street

Jackson, MS 39202
601-960-5074

OWNER OF ANIMAL

Animal Rescue Fund of MS
Charles & Pippa Jackson
395 W Mayes Street
Jackson, MS 39213
(769) 216-3414

This is to certify...

THAT I HAVE VACCINATED THE ANIMAL DESCRIBED BELOW AGAINST RABIES.

Patient information...

PATIENT: George Jackson
SPECIES: Canine
SEX: Neutered Male
WEIGHT: 41.90 lbs
MICROCHIP: 981020019649961

TAG NO: 50358
BREED: Shepherd Mix
AGE: 9 months
COLOR: Redish Brown

MFG BY: ZOE SERIAL: 157455A EXPIRES: 11-7-17, ADMIN: Sq

Signed:

Sylvia Y Stewart

License: 630

Other Vaccinations...

Vaccinated By
05-10-17 SYS

Vaccination
Canine DA2PP

Next due
(none)

Found Animals
Registry



981020019649961 981

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Monroe Street Animal Clinic

Patient Chart

607 Monroe Street
Jackson, MS 39202
601-960-5074

Printed: 11-28-17 at 4:11p

CLIENT INFORMATION

Name Animal Rescue Fund of MS (396)
Address Charles & Pippa Jackson; 395 W Mayes Str **Spouse** 601-750-2740
Jackson, MS 39213
Phone 769 216-3414
Cell 601-940-5156

PATIENT INFORMATION

Name	George Jackson	Species	Canine
Sex	Male, Neutered	Breed	Shepherd Mix
Birthday	02-14-17	Age	9m
ID	981020019649961	Rabies	50358
Color	Redish Brown	Weight	41.90 lbs
Reminded	(none)	Codes	

Reminders for: George Jackson		Last done
06/18	DA2PPL	06-12-17
06/18	Bordetella Intranasal	06-12-17
05/18	Canine Rabies, ARF-MS	05-17-17

MEDICAL HISTORY

Date	By	Code	Description	Qty (Variance)	Photo
11-27-17	SYS	S218 FEC01	Health Certificate, Interstate Fecal Examination, Flotation		
			Negative		
		844	Skin Scrapping for Mites		
			Negative		
		SAHEX	Small Animal Health Examination		
		BAR; NSF: Temp 101.5; weight today is 41.9			
11-09-17	SYS	MSUCBC	MVRD&L CBC		
			See M17-09988		
11-07-17	SYS	3210	Cephalexin 500 mg	28	
			Starting Wednesday 11/8/2017		
			Give one capsule morning and night with food until completed		
		B478	Medicated Bath, Small		
11-03-17	SYS	844	Skin Scrapping for Mites		
			Demodex Mites +4/4		

Patient Chart for George Jackson
Date: 11-28-17, Time: 4:11p

Client: Animal Rescue Fund of MS
Page: 2

Date	By	Code	Description	Qty (Variance)	Photo
06-12-17	SYS	CVARFB CVARFD 844	Bordetella Bronchiseptica Intranasal DA2PPL Skin Scrapping for Mites		
			Demodex +4/4		
		4532.5M	Advantage Multi 20.1-55 Single Dose		
			weight today is 21.8; previous weight 13.8		
05-17-17 ID: 50358	SYS Serial: 157455A	CV509 FOUND	Canine Rabies, ARF-MS, #50358 Expires: 11-7-17 Type: KV Found Animals Microchip	Mfg: ZOE	Admin: Sq
			981020019649961		
		SR285	Castration Canine-ARF		
05-10-17	SYS	4912 CV406	Interceptor Plus Tablet 8.1 to 25 lbs Canine DA2PP		
04-10-17	SYS	DT515 FEC01	Deworm, Puppy/Kitten Fecal Examination, Flotation		
			Hook worms and Round worms		
		CV406	Canine DA2PP		



Mississippi State University
College of Veterinary Medicine
Mississippi Veterinary Research
and Diagnostic Laboratory

3137 Highway 468 West
Pearl, MS 39208
Phone: 601-420-4700
Fax: 601-420-4719

Final Report

Owner:

ARF

Clinic:

Monroe Street Animal Clinic
607 Monroe Street
Jackson, MS 39202
Phone: (601) 960-5074
Fax: +1 (601) 960-5076

RDVM:

Dr Sylvia Stewart

Accession Number: M17-09988

Case Coordinator: Leslie Touchstone

Received: Nov 09, 2017

Finalized: Nov 09, 2017

Species: Canine

Breed: MIXED BREED DOG

Sex: Neutered Male

Age: 8m

Animal Name: George

Specimen: Blood

Sampled: Nov 07, 2017

Clinical Pathology

CBC

Animal ID:	George				
WBC	11.6	K/ul	7.0 - 22.0	11/09/2017 12:25 PM	
RBC	6.39	M/ul	4.30 - 8.77	11/09/2017 12:25 PM	
HGB	14.9	g/dl	11.0 - 19.0	11/09/2017 12:25 PM	
HCT	45.5	%	34.0 - 60.0	11/09/2017 12:25 PM	
MCV	71.2	fL	63.0 - 77.0	11/09/2017 12:25 PM	
MCH	23.3	pg	15.0 - 29.0	11/09/2017 12:25 PM	
MCHC	32.7	g/dl	32.0 - 37.0	11/09/2017 12:25 PM	
Platelets	342	K/ul	160 - 650	11/09/2017 12:25 PM	
Segs %	50	L %	60 - 77	11/09/2017 12:25 PM	
Segs	5800	/ul	3500 - 14200	11/09/2017 12:25 PM	
Lymph %	40	H %	12 - 30	11/09/2017 12:25 PM	
Lymph	4640	/ul	1200 - 6500	11/09/2017 12:25 PM	
Mono %	4	%	3 - 10	11/09/2017 12:25 PM	
Mono	464	/ul	175 - 1700	11/09/2017 12:25 PM	
Eos %	6	%	2 - 10	11/09/2017 12:25 PM	
Eos	696	/ul	120 - 1300	11/09/2017 12:25 PM	

Platelet Morphology: Few Mega Platelets
RBC Morphology: RBC morphology appears normal
Performed By: Leslie Touchstone
Performed On: November 9, 2017



DATE	ANIMAL NAME/ID
	George
	IF A SURRENDER- NAME OF VET AND OWNER
	TYPE AND BREED OF ANIMAL Shepherd mix NM
	TEMPERMENT OF ANIMAL
	CONDITION OF ANIMAL
10-10-17	Heartworm test: neg, Anaplas neg, Ehrlich neg, Fecal: Temp: Weight: Nails: Coat: VACCINE GIVEN @ Monroe Street vet
7-10-17	Advantage Multi.
8-10-17	Advantage Multi, Bravecto
9-10-17	Interceptor
10-10-17	Interceptor, Nextguard
11-10-17	Interceptor, Nextguard
11-10-17	Giardia neg
11-7-17	Cephalexin BID 14 days
11-7-17	Medicated Bath
11-14-17	Medicated Bath
	COMMENTS
	CONTINUE ON NEXT PAGE IF APPLICABLE

Wellness Exam

Dog Name:	GEORGE	Breed: Shup X	mixed breed
Description:	Red Brown		
Weight:	41.9	Est DOB/Age:	2-14-2017
Sex:	MCN		9m
Exam Performed By:	Sy Stewart DVM	Temperature:	101.5
		Date of Exam:	11/27/2017

Physical Examination:		
Musculoskeletal System	Within Normal Limit	Abnormal
Notes:		
Gastrointestinal System	WNL	Abnormal
Notes:		
Weight	WNL	Abnormal
Notes:		
Haircoat	WNL	Abnormal
Notes:		
Skin	WNL	Abnormal
Notes:		
Ears / Eyes / Nose / Throat	WNL	Abnormal
Notes:		
Mouth/Teeth	WNL	Abnormal
Notes:		
Heart / Pulse	WNL	Abnormal
Notes:		
Lungs	WNL	Abnormal
Notes:		
Lymph nodes	WNL	Abnormal
Notes:		
Legs	WNL	Abnormal
Notes:		
Abdomen	WNL	Abnormal
Notes:		
Comments:		

Animal Vetting Summary Sheet

Dog's Name	GEORGE		Est DOB/Age	2-14-2017	9m
Weight	41.9		Breed	Shen Mut	
Sex	MCN		Color	Ruddy Brown	
Notes/Warnings					
Medications					
Basic Vetting			REMINDERS		
Vaccinations & Preventatives	Type & Date(s)	NEXT DUE DATE			
DA2PPv	5/10/2017; DA2PPL 6/12/17	6-12-2018			
Bordetella	6/12/2017	6-12-2018			
Rabies	5/17/2017	5-17-2018			
Heartworm Preventative	Inteceptor 11-7-17				
Flea/Tick Preventative	Nextguard 11-7-17				
Dewormers (Type)	Date(s)	NEXT DUE DATE			
Other	Date(s)	Results/Notes:			
Heath Certificate*	11/27/2017				
Fecal*	11/27/2017	NEGATIVE			
Circle type: Smear / Flotation / Other					
Giardia SNAP test*	11-10-17	Negative			
Spay/Neuter Date*	5-17-2017				
4Dx SNAP Test (Anaplasmosis, Lyme, Ehrlichia, Heartworm)	10-10-17	Negative			
Microchip Brand	FOUND	Microchip #	 981020019649961 981		
Other Vetting					
Type (eg, tx type/regimen, test name)	Date(s)	Results/Comments:			
Reminders for Upcoming Special Vetting					
Sending Rescue/Shelter			Receiving Rescue		
Group Name	AREFMS		Group Name	SOSARL	
Contact	E JACKSON		Contact	Emma Dawley	
Phone	601 750 2740		Phone	401-206-0727	
Email	AREFMS@comcast.net		Email	info@sosarl.org	
 ANIMAL RESCUE LEAGUE			www.sosarl.org (p) 401.206.0727 (f) 954.208.2727 info@sosarl.org PO Box 498, Wakefield, RI 02880		

*Health certificate date must be 10 days or less of delivery to new home. Dogs positive for coccidia or giardia CANNOT travel. Last vaccine must be no less than 7 DAYS PRIOR to transport; check each transport's requirements as some are MORE strict. Surgery must be at least 5 DAYS PRIOR to transport departure; check each transport's requirements as some are MORE strict. If test other than the 4Dx SNAP is to be used, it must be approved by SOS.

Your pet's microchip...

- Provides permanent identification
- Never needs replacement
- Helps your pet get home safely

A microchip is not a GPS - it is a permanent ID number that links to your contact information in the registry. Visible ID tags are your pet's first line of defense if lost or stolen, but the microchip provides permanent protection. Just keep your contact information up-to-date in the registry, and the microchip will always be there to help your pet get home. **Save this card in your pet's medical file for future use.**

GEORGE

How To Register:

- Step 1 Visit www.found.org/start
- Step 2 Provide as much contact information as possible
- Step 3 Add a photo and notes in your pet's profile, then register your other pets for free



981020019649961 981

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Every lost pet
deserves to be found.

customerservice@found.org
PO Box 66370 Los Angeles, CA 90066



Found Animals.
Registry



981020019649961 981

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981020019649961 981 STERILITY EXP 2019-05 2