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 USC 2143: 9 CFR, Subchapter A, Part 2).

(See reverse for additional OMB statement)

FORM APPROVED OMB NO. 0579-0036)

## U.S. DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

WARNING: Anyone who makes a false, fictitious, or fraudulent statement on this document, or uses such

1. TYPE OF ANIMAL SHIPPED  Dog Cat Other  Nonhuman Primate	N100015
2. TOTAL NUMBER OF ANIMALS	PAGE

UNITED STATES INTERSTATE AND INTERNATIONAL CERTIFICATE OF HEALTH EXAMINATION		may be sut	if to be false, fictilious of fine of not more than \$1 of more than 5 years or bo	0,000 or	Nonhuman Primate				PAGE PAGE				
FOR SMALL ANIMA	LS	U.S.C 1001).			2. TOTAL NUMBER OF ANIMALS							PAGE	
3. NAME, ADDRESS AND TELEPHONE NUMBER OF OWNER/CONSIGNOR				4. NAME, ADDRESS AND TELEPHONE NUMBER OF CONSIGNEE									
USDA License/or Registration No. if applicable  Telephone:				USDA License/or Registration No. if applicable Telephone:									
5. ANIMAL IDENTIFICATION (To be completed by owner/consignor)					6. VACCINATION HISTORY (To be completed by veterinarian) attach original signature rabies certificate here								
COMPLETE USDA TAG BREED - COMMON COLLAR AND/OR TATTOO OR SCIENTIFIC NUMBER NAME	AGE	SEX	COLOR OR DISTINCTIVE MARKS	RABIES   Killed Virus   Live Virus		D-H-L		OTHER VACCINATIONS, TESTS OR TREATMENT					
		<u> </u>	_		Date	4	Product	Date	Product	Date	Type/Result		
(1)						4				-			
(2)						_							
(3)			_			4							
(4)		-											
(5)													
(6)													
(7)													
(8)						$\neg$							
(9)													
(10)						$\neg$							
"X" applicable statements					VETERINARY CERTIFICATION: I certify that the animal (s) described in item 5 have been examined by me this date, that the information provided in item 6 is true and accurate to the best of my knowledge, and that the following findings have been made "X" applicable statements.								
OWNER/CONSIGNOR CERTIFICATION: I certify that the information concerning the animals described above in Item 5 is true and correct, and that I am the owner/consignor of such described animals and that I have physical and legal custody of such animal (s).					I certify that the animal (s) described and on continuation sheet(s) if applicable, have been inspected by me this date and appear to be free of any infectious or contagious diseases and to the best of my knowledge, exposure there to, which would endanger the animal or other animals or would endanger public health.								
I hereby certify that the animal(s) in this shipment is (are), to the best of my knowledge acclimated to air temperatures lower than 7.2° c, (45° f).				I certify that the animal (s ) described above, and on continuation sheet(s) if applicable, have been inspected by me this date and appear to be free of physical abnormalities which would endanger the animal.									
IGNATURE DATE					To my knowledge the animal (s) described above, and on continuation sheet(s) if applicable, originated from an area not quarantined for rabies and have not been exposed to rabies.								
ENDORSEMENT FOR INTERNATIONAL EXPORT (WARNING: International Shipments require certification by an accredited veterinarian. States may also require such certification).				NAME, ADDRESS AND TELEPHONE NUMBER LICENSE NO.									
Apply USDA Seal or Stamp here				Accredited (1) Yes						Accredited   Yes   No			
								Telephon	e:		LICENSING STATE		
SIGNATURE OF USDA VETERINARIAN			DATE			SIGNATURE					DATE		

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average .1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information and 1 hour for recordkeeping