According to the Paperwork Reduction A information unless it displays a valid OMI The time required to complete this inform searching existing data sources, gathering	B control number. The valid OMB conti mation collection is estimated to avera	rol numbe ge .25 ho	ers for this ours per r	s information collection are 0579-003 esponse, including the time for revi	36 and 0579-0333. ewing instructions,	No dog, cat, nonhuman primate, or addi USDA regulation shall be delivered transportation in commerce, unless acc issued by a licensed veterinarian (7 U.S.	to any inter	mediate handler or carrier a health certificate executed	for 0579-0036	
ANIMAL AND PLANT HEALTH INSPECTION SERVICE INITED STATES INTERSTATE AND INTERNATIONAL			us, or fra nent, or i false, fic	anyone who makes a false, audulent statement on this uses such document knowing it titious, or fraudulent may be te of not more than \$10,000 or	TYPE OF ANIMAL SHIPPED Dog		2. C	2. CERTIFICATE NUMBER		
CERTIFICATE OF HEALTH EXAMINATION FOR SMALL ANIMALS			onment	of not more than 5 years or both	3. TOTAL NUMBER OF ANIMALS			4. PAGE		
FOR SMALL ANIMALS (18 U.S.C. 1001). 5. NAME, ADDRESS, AND TELEPHONE NUMBER OF OWNER (CONSIGNOR)					6. NAME, ADDRESS, AND TELEPHONE NUMBER OF RECIPIENT AT DESTINATION (CONSIGNEE)					
USDA License/or Registration Number if applicable			Telep	phone	USDA License/or Registration Number if applicable			Telephone		
7. ANIMAL IDENTIFICATION					8. VACCINATION HISTORY (Coverage of vaccine)					
NAME, MICROCHIP, AND/OR TATTOO NUMBER OR OTHER	BREED – COMMON OR SCIENTIFIC	AGE	SEX	COLOR OR DISTINCTIVE MARKS	RABIES 1 YEAR 2 YEARS 3 YEARS		TRI	OTHER VACCINATIONS TREATMENT AND/OR TESTS AND RESULTS		
IDENTIFICATION	NAME				Vaccination Date	Product	Date	Product Type	e and/or Results	
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
REMARKS OR ADDITIONAL CERTIFICATION STATEMENS (WHEN REQUIRED)					VETERINARY CERTIFICATION: I certify that the animals 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.					
					I certify that I have verified the identity of the animals listed in box 8.					
					I certify that the animal(s) described 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.					
SIGNATURE 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 (NOTE: International shipments may require certification by an accredited veterinarian. States may also require such certification.)					NAME, ADDRESS, AND TELEPHONE NUMBER OF VETERINARIAN LICENSE NUMBER					
Apply USDA Seal or Stamp here									Accredited Yes No LICENSING STATE	
SIGNATURE OF USDA VETERINARIAN				DATE	SIGNATURE				DATE	