

Contact State of destination for current movement requirements

STATE OF GEORGIA
CERTIFICATE OF VETERINARY INSPECTION
 Livestock and Poultry
 Use Federal Forms for Foreign Shipments

Valid for 30 days following the date of inspection of the animal(s) identified on the document.

Number
24GA504471

Page #
2/2

INDIVIDUAL ANIMAL IDENTIFICATION				TEST(S)				VACCINATION(S)				
FEDERAL EARTAG #, REGISTRATION TATTOO, OR OTHER PERMANENT IDENTIFICATION	REGISTRY NAME AND NUMBER DESCRIPTION AND REGISTERED OWNERSHIP BRAND	BREED	AGE	SEX	TEMP	Laboratory Key A - Athens Diagnostic Laboratory, B - Athens Veterinary Diagnostic Lab	Disease Key EIA - Equine Infectious Anemia	PRODUCT INFO	DATE OF VACC.			
LINE #						Disease	Remarks	Accession	Serial #	Date Sampled	Lab	Results
6	Aisha	Tennessee Walker	14 Y	F	100.2	EIA	AGID	A24-54988		05/24/2024	B	N
14												
15												
16												
17												
18												
19												
20												
21												
22												

VETERINARY CERTIFICATION - I certify, as an accredited veterinarian, that the above described animals have been inspected by me and that they are not showing signs of infectious, contagious and/or communicable diseases (except where noted). The vaccinations and results of tests are indicated on the certificate. To the best of my knowledge, the animals listed on this certificate meet the State of destination and federal interstate requirements. No further warranty is made or implied.

Signature **Dr. Donald Savage** Electronically signed through USDA VSPS 07/15/2024 05:49 PM EDT
 The issuing accredited veterinarian has been level-2 authenticated and is accredited in the issuing State.
 The paper copy accompanying the shipment must be signed by the issuing veterinarian.

Print Name **Donald Savage** License # **VET009944**
 Address **Northeast Georgia Veterinary Services** Nat'l Accred # **084975**
PO Box 319 Phone **(770) 535-2446**
Clermont, GA 30527

STATE CERTIFICATION/REQUIREMENTS

OWNER/AGENT STATEMENT (Where applicable)
 "The animals in this shipment are those certified to and listed on this certificate."

S/ _____ Date _____

ISSUED