



PATIENT RECORD

ANIMAL NAME Gecko SHH ID # D120375

BREED Lab mix SEX MN AGE 6 months

LAB TESTS -----

3/16/12 HWT (-)

PREVENTATIVES -----

3/16/12 Werhant, Capstar
3/16-3/18/12 panacel

VACCINES -----

MICROCHIP -----

NOTES -----

Tel.: 417-623-3642 | Fax:417-623-5343 417-623-5343

Kennel Card



This pet is eligible for 30 days of pre-paid health insurance when adopted from our organization. For more information, please visit www.sheltercare.com or call 1-866-375-PETS. Our organization offers 24PetWatch microchips, which include free registration into the 24PetWatch pet recovery service. For more information call 1-866-597-2424.



Animal Adoption & Resource Center

Gecko

Animal ID: A15475942 **Stage:** Pending Rescue Group Transfer **Review Date:** **Location:** Puppy Stray/

Description:

Gecko **Retriever, Labrador/ Alaskan Husky, White / / , Medium**
 Dog , **DOB:** , **Currently Altered:** Yes
 Male **Declawed:** None
 Young Adult **Collars:** / , **Bitten:** **No Bite History**, **Distinguishing Marks:** None

Intake Info:

<u>Intake Date/Time</u> 2/21/2012 4:50:00 PM	<u>Intake Type</u> Stray	<u>Intake Sub Type</u> Public Drop Off	<u>Intake Reason</u>
<u>Jurisdiction</u> City of Joplin, MO	<u>Location Found</u> Nighthawk Lane		

Microchip Info:

<u>Microchip #</u> 0A13073131	<u>Microchip Type</u> 24PetWatch	<u>Implant Date</u> 3/14/2012
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Pet ID Info:

<u>Pet ID Number</u> 74024 3209	<u>ID Type</u> Login Number Rabies Tag	<u>Issue Date</u>	<u>Expire Date</u>	<u>Issuer</u>	<u>Issuer Phone Number</u> - - -
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Medical Summary

<u>Medical Record #</u>	<u>Type</u>	<u>Subtype</u>	<u>Medical Status</u>	<u>Temperament Status</u>	<u>Exam/ Surgery Date ^</u>	<u>Review Date</u>
M15997735	Exam	Initial			02/25/2012 02:16 PM	
M16019323	Exam	Re-check			03/12/2012 09:49 AM	
M16029561	Surgery	Spay / Neuter			03/14/2012 10:33 AM	

<u>Vaccinations</u>	<u>Type</u>	<u>Vaccination Date ^</u>	<u>Re-Vacc Date</u>	<u>Pet ID</u>	<u>Pet ID Type</u>	<u>Record #</u>
Intranasal Bordetella, Canine	Not Set up	02/25/2012 02:16PM	06/25/2012 02:16PM			M15997735
Canine Distemper Combo-2 wk	Modified Live	02/25/2012 02:16PM	03/10/2012 02:16PM			M15997735
Canine Distemper Combo-2 wk	Modified Live	03/12/2012 09:49AM	03/26/2012 09:49AM			M16019323
Rabies, 1 year	Modified Live	03/14/2012 10:33AM	03/14/2013 10:33AM	3209	Rabies Tag	M16029561

<u>Treatments</u>	<u>Type</u>	<u>Dose/Recurrence</u>	<u>For Treatment Date ^</u>	<u>Review Date</u>	<u>Record #</u>
Frontline Plus Dogs/Puppies	Medication	1 app	02/25/2012 02:16PM	03/26/2012 02:16PM	M15997735
Pyrantel 1cc per 10lbs	Medication	1 cc / 1 x's every 1 day(s) for 1 Days (1 of 1)	02/25/2012 02:16PM		M15997735

Pyrantel 1cc per 10lbs	Medication	1 cc / 1 x's every 1 day(s) for 1 Days (1 of 1)	03/12/2012 09:49AM	M16019323
Orchidectomy/Neuter, Canine	Procedure		03/14/2012 10:33AM	M16029561



Vaccination Certificate -

Animal Adoption &
Resource Center

Tel: 417-623-3642

Animal Adoption & Resource Center
140 E Emperor Lane
JOPLIN Missouri 64801 USA
shelter@joplinhumane.org
www.joplinhumane.org

Animal Information

AnimalID:A15475942 **Name:** Gecko **Types:** Dog **Gender:**Male
ARN: **DOB:** **Breeds:**Retriever, Labrador, Alaskan Husky **Altered:**Yes
Chip #: 0A13073131 **Current Age:** **Colors:** White/ **Size:** Medium
Type: 24PetWatch **Age Group:** Young Adult **Pattern:** **Weight:**

Vaccination Certificate

Vaccine:Canine Distemper
Combo-2 wk
Length: 2 weeks
Product:Duramune Max 5
Mfg: Boehringer Ingelheim

Status: Completed
Re-Vac Date: 03/10/2012
Provider: Jackie Turosik
Serial / Lot #:

Status Date: 02/25/2012
Body Part: Left Front
Assistant:
Expiry Date:

Dose: 1.00 vial
Route: Subcutaneous
Type: Modified Live
Container #:

Vaccine:Intranasal Bordetella,
Canine
Length: 6 months
Product:Vanguard B IN
Mfg: Pfizer Animal Health

Status: Completed
Re-Vac Date: 08/25/2012
Provider: Jackie Turosik
Serial / Lot #:

Status Date: 02/25/2012
Body Part:
Assistant:
Expiry Date:

Dose: 1.00 vial
Route: Intranasal
Type:
Container #:

ID #:
ID Type:

Issued:
Expires:

ID Issuer:
Issuer Phone:

Is License? No

Vaccine:Canine Distemper
Combo-2 wk
Length: 2 weeks
Product:Duramune Max 5
Mfg: Boehringer Ingelheim

Status: Completed
Re-Vac Date: 03/26/2012
Provider: Carol Wiley
Serial / Lot #:

Status Date: 03/12/2012
Body Part: Left Front
Assistant:
Expiry Date:

Dose: 1.00 vial
Route: Subcutaneous
Type: Modified Live
Container #:

Vaccine:Rabies, 1 year
Length: 1 years
Product:Rabdomun Vaccine

Status: Completed
Re-Vac Date: 03/14/2013
Provider: Jennifer Barber, DVM

Status Date: 03/14/2012
Body Part:
Assistant:

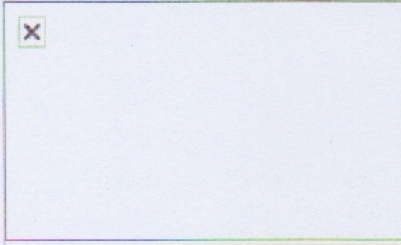
Dose: 1.00 vial
Route: Intramuscular
Type: Modified Live

Mfg: Intervet/Schering-Plough **Serial /** 1215347A **Expiry** **Container**
 Animal Health **Lot #:** **Date:** **#:**
ID #: 3209 **Issued:** **ID Issuer:** **Is** No
ID Type: Rabies Tag **Expires:** **Issuer** **License?**
Phone: - - -

Provider Information

Name: Jennifer Barber, DVM

DVM License #: 2008021988



License No. 2008021988

Jennifer L Barber, DVM

Joplin Humane Society, Inc.
140 E. Emperor Lane
Joplin, MO 64801

Surgery Certificate - Mar 14 2012

Tel: 417-623-3642



Animal Adoption &
Resource Center

Animal Adoption & Resource Center
140 E Emporer Lane
JOPLIN Missouri 64801 USA
shelter@joplinhumane.org
www.joplinhumane.org

Animal Information

Animal ID:	A15475942	Name:	Gecko	Types:	Dog	Gender:	Male
ARN:		DOB:		Breeds:	Retriever, Labrador, Alaskan Husky	Altered:	Yes
Chip #:	0A13073131	Current Age:		Colors:	White/	Pre-Altered:	
Type:	24PetWatch	Age Group:		Pattern:		Size:	Medium

Surgery Information

Record #:	M16029561	Type:	Surgery	Subtype:	Spay / Neuter
Status:	Completed	Status Date:	03/14/2012 10:33AM	Review Date:	
Site:	Animal Adoption & Resource Center	Provider:	Jennifer Barber, DVM	Assistant:	

Surgery Notes

Transfer Out Contract - Mar 14 2012

Tel.: 417-623-3642



Animal Adoption & Resource Center

Animal Adoption & Resource Center
140 East Emporer Lane
Joplin, Missouri 64801 USA
shelter@joplinhumane.org
www.joplinhumane.org

Secondhand Hounds
3113 West 60th Street
Minneapolis, Minnesota 55410 USA

Person ID: P09952049 Agency: Secondhand Hounds
Tel:612-269-9019

Animal Information

Animal ID: A15475913	Name: Gordon	Breeds: Retriever, Labrador/Alaskan Husky	Gender/ Male
ARN:	Types: Dog	Colors: White	Altered: Yes
DOB:	Current Age:	Pattern:	Size: Medium

Shelter : Rescue Transfer Form

Upon taking custody of the above animals, our rescue group will be responsible for the ultimate care, handling and placement/adoption of the animal, including required spaying/neutering and vaccinations if not already done, agreed to by signing below.

The animal described above may not have been tested, vaccinated, or examined and has been sheltered in this facility with animals that may have been exposed to disease and/or illness, including Kennel Cough, URI and Canine Parvovirus. Most animals sheltered in this facility are impounded strays with no known owners and no known medical history. We strongly recommend that the animal or animals that you are taking be quarantined for at least two weeks from other rescue, personal or foster pets.

I am an authorized representative of the above named rescue, I agree to reimburse AARC/Joplin Humane Society for the following services provided for the animals I am receiving:

 THIS PET IS SPONSORED

- \$ 10 Vaccinations (Distemper/Internasal Bordatella) and Deworming
- \$ 10 Rabies Vaccine
- \$ 10 Health Certificate
- \$ Heartworm Test
- \$ Lab Work
- \$ 50 Spay/Neuter
- \$ 10 Microchip
- \$ Other _____

\$ 90 TOTAL

I accept the animal described in this agreement for transfer to the appropriate rescue as indicated.

Signature of Authorized Agent

Print Name of Authorized Agent

Shelter Representative (Print clearly):

K Cruzan

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for this information collection are 0579-0036 and 0579-0333. The time required to complete this information collection is estimated to average .25 hours 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.

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).

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

UNITED STATES INTERSTATE AND INTERNATIONAL
CERTIFICATE OF HEALTH EXAMINATION
FOR SMALL ANIMALS

5. NAME, ADDRESS, AND TELEPHONE NUMBER OF OWNER (CONSIGNOR)
Joplin Humane Society
140 E Emperor Lane
Joplin, MO 64801
417-623-3642

6. NAME, ADDRESS, AND TELEPHONE NUMBER OF RECIPIENT AT DESTINATION (CONSIGNEE)
Secondhand Hounds
3116 W 6th St
Minneapolis, MN 55410
612-269-9019

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

2. CERTIFICATE NUMBER - OFFICIAL USE ONLY
JHS0000100

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

8. PERTINENT VACCINATION, TREATMENT, AND TESTING HISTORY

NAME, AND/OR TATTOO NUMBER OR OTHER IDENTIFICATION	BREED - COMMON OR SCIENTIFIC NAME	AGE	SEX	COLOR OR DISTINCTIVE MARKS OR MICROCHIP	RABIES VACCINATION		OTHER VACCINATIONS, TREATMENT, AND/OR TESTS AND RESULTS	
					Vaccination Date	Product	Date	Product Type and/or Results
(1) 15563914 Liza Jane ✓	Chi x	A	F/S	Brown	03/14/2012	Defensor 3	see attached	see attached
(2) 15579340 JoJo	Pit bull x	J	M/N	Brindle/white	03/14/2012	Defensor 3	see attached	see attached
(3) 15475942 Gecko	Husky/Lab x	J	M/N	white	03/14/2012	Defensor 3	see attached	see attached
(4) 15475913 Gordon	Husky/Lab x	J	M/N	white	03/14/2012	Defensor 3	see attached	see attached
(5) 15590106 Keith	terrier x	A	M/N	brown	03/14/2012	Defensor 3	see attached	see attached
(6)								

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

SIGNATURE OF USDA VETERINARIAN Apply USDA Seal or Stamp here

DATE

NAME, ADDRESS, AND TELEPHONE NUMBER OF ISSUING VETERINARIAN
 Jennifer Barber, DVM
 The Joplin Humane Society
 140 E Emperor Lane
 Joplin, MO 64801
 417-623-3642

LICENSE NUMBER AND STATE
 MO2008021988

Accredited Yes No
 If yes, please complete below
 NATIONAL ACCREDITATION NUMBER
 056502

NOTE: International shipments may require certification by an accredited veterinarian.
 SIGNATURE OF ISSUING VETERINARIAN
 DATE 3/11/12

This certificate is valid for 30 days after issuance

APHIS Form 7001 (NOV 2010)