



581678-1

ENTER MICROCHIP ID OR PLACE MICROCHIP ID STICKER HERE

IMPORTANT: Enter the correct microchip number for proper and expedited enrollment in the HomeAgain® pet safety and wellness network.



# HomeAgain®

ALWAYS LOOKING OUT FOR YOUR PET

Return this section to the clinic/shelter

## PET/PRIMARY CONTACT INFORMATION

## Pet Information

Pet name Dog ☐ Cat ☐ Other Pet date of birth  -  - 

## Primary contact

First name Last name Address Apt. City State ZIP E-mail Phone 1 (  )  -  Ext.  Phone 2 (  )  -  Ext. 

I understand I will receive service-related communications. However, I may choose not to receive other HomeAgain communications.

Please do not send me: (check all that apply)

☐ PetRescuer email alerts when a pet is lost in my neighborhood☐ Email special offers☐ Email newsletters with articles on pet protection and safety

## Alternate contact

First name Last name Phone 1 (  )  -  Ext.  Phone 2 (  )  -  Ext. 

DO NOT SEND CASH. DEBIT CARDS ARE NOT ACCEPTED.

## PAYMENT OPTIONS

HomeAgain® membership services are \$16.99 per year.\*

VISA ☐ MVC ☐ AMEX ☐ DISCOVER ☐Account #  -  -  - Expiration date  - 

Complete if address is different than above.

Billing address Apt. City State ZIP ☐ Check enclosed for annual membership fee

Make check payable to HomeAgain® and mail to: HomeAgain®, P.O. Box 28153, Miami, FL 33102-8153

Enrollment paid by clinic ☐Promotion code (if applicable) Signature Print name Date 

You understand that once charged, membership fees are non-refundable.

\* Membership fees are subject to change.

**IMPORTANT** Please return this form to the HomeAgain Pet Recovery Service or we will not be able to identify your pet if lost.To enroll, mail this form to HomeAgain, P.O. Box 28153, Miami, FL 33102-8153, visit [www.homeagain.com](http://www.homeagain.com) or call 1-888-HOMEAGAIN (1-888-466-3242).

PLEASE PRINT IN BLUE OR BLACK INK

# Ridge Veterinary Hospital

23992 U.S. Highway 27

Lake Wales, FL 33859

863-676-8240

Shar'Pei Rescue  
2232 Firestone Place  
Winter Haven, FL 33880

Date: March 1, 2011  
Receipt Number: 0188476  
Client Number: 25436

Method of Payment - Credit Card  
Transaction Amount: \$134.40

Beginning Balance - 03/01/2011	0.00
Payment - Credit Card	-134.40
Invoice 0188472	134.40
Payment - Credit Card	-10.00
Invoice 0188470	10.00
Ending Balance - 03/01/2011	0.00

Transaction Processed by: VA

# Ridge Veterinary Hospital

23992 U.S. Highway 27

Lake Wales, FL 33859

863-676-8240

## Invoice

Reference Number: 0188472

Date: March 1, 2011

Shar'Pei Rescue  
2232 Firestone Place  
Winter Haven, FL 33880

Patient: Maizy  
Species: Canine  
Breed: Chinese Shar Pei  
Rabies Given:  
MicroChip ID: None

Patient Number: 25436-0001  
Born:  
Sex: Female Color:

Follow Up Action	Due Date
No followup actions scheduled at this time.	

Date	Product / Service	Quantity	Amount	Vet
03/01/2011	E001 - EXAM/OFFICE VISIT	1.00	47.50	TY
03/01/2011	T007 - MEDICAL WASTE FEE	1.00	3.00	TY
03/01/2011	L058 - URINALYSIS - COMPLETE	1.00	55.00	TY
03/01/2011	Z341 - HOME AGAIN CHIP	1.00	30.00	TY
03/01/2011	Z347 - PROIN 50 MG	1.00	25.00	TY
03/01/2011	Z380 - DISCOUNT - OTHER	1.00	-26.10	TY

Sub Total 134.40

Amount Due this Invoice 134.40

### Account Summary

Beginning Account Balance - 03/01/2011 0.00

Invoice 0188472 - Maizy 134.40

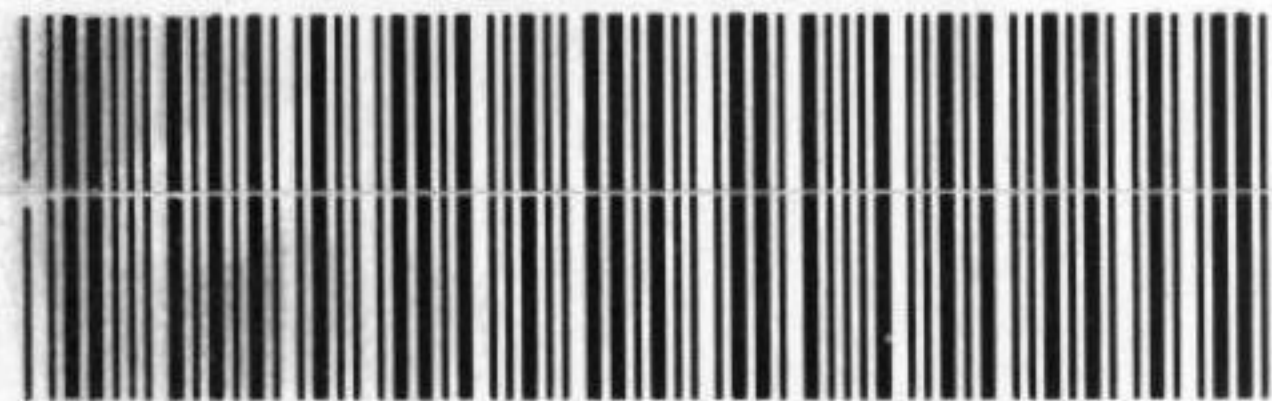
Payment - Credit Card V -10.00

Invoice 0188470 - Maizy 10.00

Ending Account Balance - 03/01/2011 134.40

Transaction Processed by: VA

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# RECEIPT

## SPCA

5850 Brannen Road South  
Lakeland, FL 33813  
863-646-7722

"Our Goal Is To Make Your Pet Happy"

**FOR:** James Waxman  
745 College Avenue  
Lakeland, FL 33801  
(863) 937-6226

**Printed:** 11-09-11 at 3:49p  
**Date:** 11-09-11  
**Account:** 53569  
**Invoice:** 265199

Date	For	Qty	Description	Price	Discount	Net Price
EXAMS						
11-09-11		1	Exam			28.00
MEDICINE						
11-09-11		28	Cephalexin 500mg Capsules			10.10
11-09-11		35	Chlorpheniramine 4 mg Tabs			6.00
RABIES VACCINATIONS						
11-09-11		1	1yr Rabies	14.00	1.65	12.35
TECHNICIANS						
11-09-11		1	Jordan was your technician today			0.00
VACCINATIONS						
11-09-11		1	DHLPP	20.00	2.35	17.65
11-09-11		1	Bordatella	17.00	2.00	15.00
Total of services for MAISY						89.10

Old balance	Charges	Payments	New balance
0.00	89.10	0.00	89.10

Reminders for: <b>Maisy</b> (Weight: 47.7 lbs - 5y)		Last done
11/12	3 year rabies vaccination	
11/12	Bordatella	11-09-11
11/12	DHLPP	11-09-11

### Doctor's Instructions

#### **Jordan was your technician today**

I thank you for allowing us to take care of Maisy today. If you have any questions about today's procedures, please do not hesitate to give us a call at (863) 646-7722 and ask for me personally.