

Miami Dade Animal Services

Medical Release

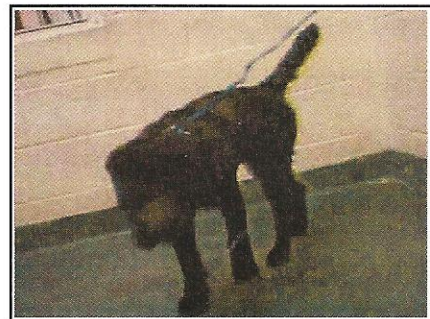
7401 NW 74th St
Miami, FL 33166
Tel (305) 884-1101
www.miamidade.gov/animals

Today's Date: 3/3/2009

Animal ID: A1135734

Name: SHAR PEI RESCUE
Address: 9600 NW 25 ST
SUNRISE, FL 33332
Phone: (954) 2581110

RAVEN



Animal information:

Name: Ann,
Breed: Chinese Sharpei
Color: black Sex: spayed Age: 0 year and 0 month

Tag Number:

Microchip No: 032889040

MEDICAL/BEHAVIORAL DISCLOSURE

The pet listed above was examined by Miami Dade Animal Services Veterinary Staff and determined to have the following medical and/or behavioral conditions:

2/26/2009
OCULAR DZ

3/3/2009
HEARTWORM

*** Please refer to Medical History Report for additional information. ***

I have received full disclosure of the medical condition(s) detected upon evaluation of the pet I am adopting, and understand that other medical conditions may exist but may not have been detected. I further understand that the treatment of the above mentioned condition(s) is my financial and legal responsibility, and this pet's prognosis is dependent on my pursuance of advanced medical and/or behavioral therapy. I consent to seek veterinary care for the disclosed condition within 7 days of the adoption, and will submit proof of such care upon request. I release the Miami Dade Animal Services Department of all responsibility/liability.

Medication received

Signature
P0790627

Date

Witness

Sherris Wright

Date

3/2/09

A1135734 ANN

SURGERY: CANINE
OVARIOHYSTERECTOMY
032889040

T09-649551 03/03/09

dog is blind

abdominal fat icteric

Anesthesia:

IM Domitor 1 mg/ml at 0.025 mg/kg,
Ketamine 100 mg/ml at 2.5 mg/kg,
Torbi 10 mg/ml at 0.25 mg/kg
Intubate, maintain on isoflurane and
O2
Pen

RABIES ADOPT A1135734 ANN

T09-649552 03/03/09

SPAY A1135734 ANN

T09-649553 03/03/09

HEARTWORM SNFA1135734 ANN

T09-649554 03/03/09

TOTAL MEDICAL FEES: \$0.00***License/Rabies Vaccination/Microchip Information:***

Tag Number	Expires	Animal#
032889040	3/3/2010	A1135734

Rabies Vxn Info- Date:3/3/2009 Term: 12 Expires: 3/3/2010 Vxn: PFI
Cert#: 032889040 Serial#: S829947 LotExp: 11/20/09 #1832854 20-50lbsANIMAL SERVICES

Shelter Hours

Monday - Friday 8:00AM - 7:00PM Saturday and Sunday 8:00AM - 5:00PM

Adoption Hours: Monday - Friday 10:00AM to 6:30PM Saturday and Sunday 10:00AM - 4:00PM

Rabies Clinic Hours: Monday - Friday 10:30AM to 6:00PM Saturday and Sunday 10:30AM - 4:00PM

RAVEN

ANN'S MEDICAL HISTORY

A1135734 0.00LBS DOG BLACK S CHINESE SHARPEI

03/03/09

2/26/2009

DVM EXAM ILLNESS 0.00LBS Treated by: JD

Bilateral otitis, bilateral eye disease, will need ophthal workup, dog is possibly blind

PANALOGOINT

3/3/2009

DVM EXAM ILLNESS 60.00LBS Treated by: DR. TANIA

SURGERY: CANINE OVARIOHYSTERECTOMY
032889040

dog is blind

abdominal fat icteric

Anesthesia:

IM Domitor 1 mg/ml at 0.025 mg/kg, Ketamine 100 mg/ml at 2.5 mg/kg, Torbi 10 mg/ml at 0.25 mg/kg

Intubate, maintain on isoflurane and O2

Pen G 300,000 u/ml at 0.1ml/lb SQ pre-op

Rimadyl 50 mg/ml at 2 mg/lb SQ pre-op

Sx:

Ventral midline incision; removal of both ovaries and uterine horns following ligation of ovarian pedicles and uterine body (one circumferential and one transfixing for dogs greater than 30 lbs) with Polyglactin or Polydioxanone suture. Body wall closure with simple interrupted suture pattern, followed by subcutaneous and/or intradermal closure with simple continuous suture pattern, with Polyglactin or Polydioxanone suture. Cyanoacrylic adhesive may be applied to skin surface. Tattoo ink aseptically applied to incision.

Routine recovery.

P: Recommend restricted exercise (no running, jumping, or horseplay) for 10 days; keep incision clean and dry and inspect twice daily until healed. Discourage chewing/licking at incision; if noted, an Elizabethan collar is recommended.

HEARTWORM SNP POSITIVE

SPAY

RABIES ADOPT

Miami-Dade County
Animal Services Department
7401 NW 74 ST, Miami, FL 33166
(305) 884-1101 (305) 805-1593 FAX
www.miamidade.gov/animals

Receipt Number: R09-368251

Receipt Date: Tuesday, March 03, 2009

Person Information: SHAR PEI RESCUE
9600 NW 25 ST
SUNRISE, FL 33332

PID: P0790627

Received From: SHAR PEI RESCUE

Check No: MC 4805

Phone: (954) 258-1110

Item:	Animal ID:	Reference No:	Price:	Each:	Amount:
MICROCHIP	A1135734	032889040	\$.00	1	\$.00
DVM EXAM	A1135734	T09-646942	.00	1	.00
PANALOG OINTMENT	A1135734	T09-646943	.00	1	.00
DVM EXAM	A1135734	T09-649551	.00	1	.00
RABIES VACCINATION	A1135734	T09-649552	.00	1	.00
SPAY SURGERY	A1135734	T09-649553	.00	1	.00
HEARTWORM SNAP TEST	A1135734	T09-649554	.00	1	.00
ADOPTION FEES	A1135734		25.00	1	25.00

Total Fees Due: **\$25.00**

Payments: Cash: \$0.00
Check: \$0.00
Credit Card: \$25.00

Total Payments Received: \$25.00

Thank You!

Change: \$0.00
Balance Due: \$0.00

Animal Information:

A1135734 ANN - OF AGE, SPAYED, CHINESE SHARPEI, BLACK DOG

Treatment Information:

Type:	Animal#	Description:	Medication:	Cost:	Treat #	Date:
	A1135734 ANN	Bilateral otitis, bilateral eye disease, will need ophthal workup, dog is possibly blind			T09-646942	02/26/09
	A1135734 ANN		PANALOGOINT		T09-646943	02/26/09

Shelter Hours

Monday - Friday 8:00AM - 7:00PM Saturday and Sunday 8:00AM - 5:00PM

Adoption Hours: Monday - Friday 10:00AM to 6:30PM Saturday and Sunday 10:00AM - 4:00PM

Rabies Clinic Hours: Monday - Friday 10:30AM to 6:00PM Saturday and Sunday 10:30AM - 4:00PM

Clerk: SHERRIW COUNTER

Transaction Date: 03/03/09

Print Date: 03/03/09 tware\chameleon\crystal\receipt.rpt

Kennel No: WW64

Animal ID: A1135734
Age /Sex: FEMALE
Breed: CHINESE SHARPEI
Color: BLACK
Intake Date: 02/25/2009
Intake Type: STRAY
Due Out Date: 03/03/2009
Hold/Adopted? POSS RESC
Tag



Additional Information:
(Markings/Identifiers)

POSS BLIND

AVID*032*889*040

AVID*032*889*040

AVID*032*889*040

- DO NOT WRITE BELOW THIS LINE - FOR ASD VETERINARIAN SECTION ONLY -

☐ Health Problem ☒ Under Treatment ☐ Do Not Adopt!

Condition on Intake: SICK

Temperament Evaluation
Date: _____

Friendly: _____
Fearful/Shy: _____
Growls: _____
Barker: _____
Other: _____

Vaccination

Date

☐ DHLPP

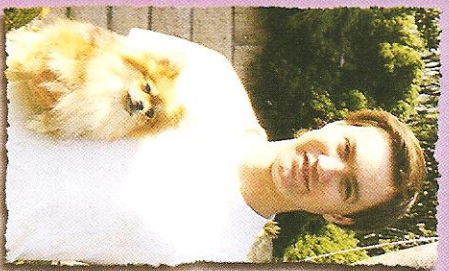
☐ RABIES

☐ FVCRPC

☐ Bordetella



1-800-336-AVID



Dear Avid,

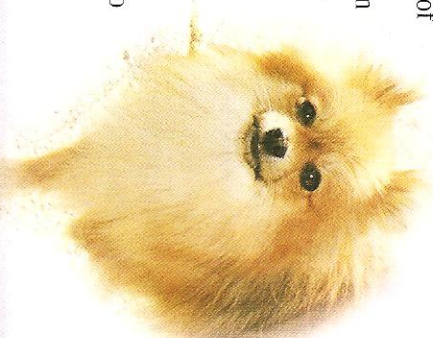
It is with tears of joy that I write this letter to you. About four months ago I lost my Pedigree Pomeranian dog, Nandy. I searched and searched for several weeks, but to no avail.

Signs were posted everywhere. Anytime one sign came down, two more would go up in its place. In the end however, despite my perseverance, it became apparent that someone had picked Nandy up and must have adopted her as their own. She wore a collar, but it is easy to remove. I eventually had to deal with the reality that there was no hope of ever seeing Nandy again. I truly love this dog...

The pleasant part of this story is shortly after Nandy's birth we had the forethought to implant the dog with one of your identification chips. I must admit that after the first month went by, there was low expectation of seeing the dog again... However, miracles still do occur. Just last Saturday Nandy must have escaped again. This time she was picked up by animal control. By the time my girlfriend and I got information that a Pomeranian dog meeting Nandy's description had been found, several other people already had laid claim to her. Proof of ownership was only possible after scanning her and positively identifying her AVID number. My gratitude to your product and staff is beyond words... I am eternally grateful. I shall speak highly of microchip implantation, with AVID Corporation in particular, until the end of my days.

Thank you once again.

Sincerely,
Richard Cavallero



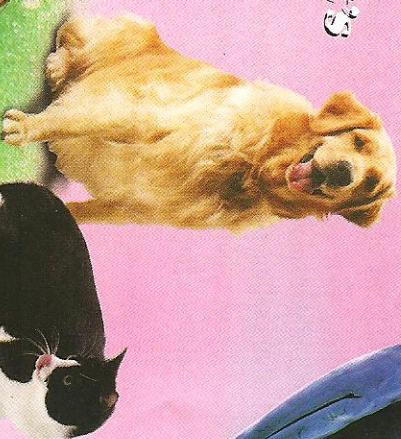
Avid

1-800-336-2843
Global 24/7 Recovery Network

FriendChip™

Clearly a runaway success

*Now you can
easily protect
your loved ones
before it's
too late.*



www.avidid.com
Email: PetTrac@avidid.com

PETTrac™ Application

Apply Today!

Enroll by mail or fax. Fill out and sign application. Enclose correct payment. Do not send cash.

- ☐ **PLAN A:** Multiple Pet Registry. Enclose payment of \$50.00 to protect up to five pets. Attach separate sheet as needed.
- ☐ **PLAN B:** Single Pet Registry or Owner Transfer. Enclose \$19.50 per pet for a lifetime pet registration. (ex. 2 pets = \$39.00)
- ☐ **INFORMATION CHANGE:** Enclose \$6.00 (ex. change of address). Special Military rates available.
- ☐ NEW MEMBER ☐ ALREADY A MEMBER

Membership or Microchip No.

1. Owner Information

Last Name	First Name	Middle Initial
Address		
City	State	Zip
Home Phone	Work Phone	
Fax	E-mail	

2. Alternate Contact

Last Name	First Name	Middle Initial
Address		
City	State	Zip
Home Phone	Work Phone	
Fax	E-mail	

3. Veterinarian/Implanter Information

Last Name	First Name	Middle Initial
Facility		
Address		
City	State	Zip
Phone	Fax	

4. Pet Information - Pet #1

Pet Name	Species (Dog / Cat / Horse / Bird / Other)	Breed
Gender	Neuter/Spay/Chemical	Date of Birth (Year/Month/Date)
M / F	Yes / No / Chem.	/ /
Color / Markings		
Medication		
Other Data		
Microchip ID# (please check for accuracy)		

5. Pet Information - Pet #2

Pet Name	Species (Dog / Cat / Horse / Bird / Other)	Breed
Gender	Neuter/Spay/Chemical	Date of Birth (Year/Month/Date)
M / F	Yes / No / Chem.	/ /
Color / Markings		
Medication		
Other Data		
Microchip ID# (please check for accuracy)		

Make check payable to AVID® in the amount of \$19.50 per pet for the Single Pet Registry or Owner Transfer, or \$50.00 for the Multiple Pet Registry, or \$6.00 for information change.

PAYMENT:

☐ Check or Money Order

CHARGE MY:

☐ VISA

☐ Master Card

☐ Discover

☐ American Express

Card #

Expiration Date

Security Code

AUTHORIZATION

I acknowledge that the above information is true and correct. My signature authorizes the release of this information and payment if paying by credit card.

Signature

Date

PHONE: 951-371-7505 • 800-336-AVID • FAX: 951-737-8967

E-mail: Pettrac@AvidID.com • www.AvidID.com

REV. 05/06

MOISTEN HERE

MOISTEN HERE

MOISTEN HERE

MOISTEN HERE

MOISTEN HERE

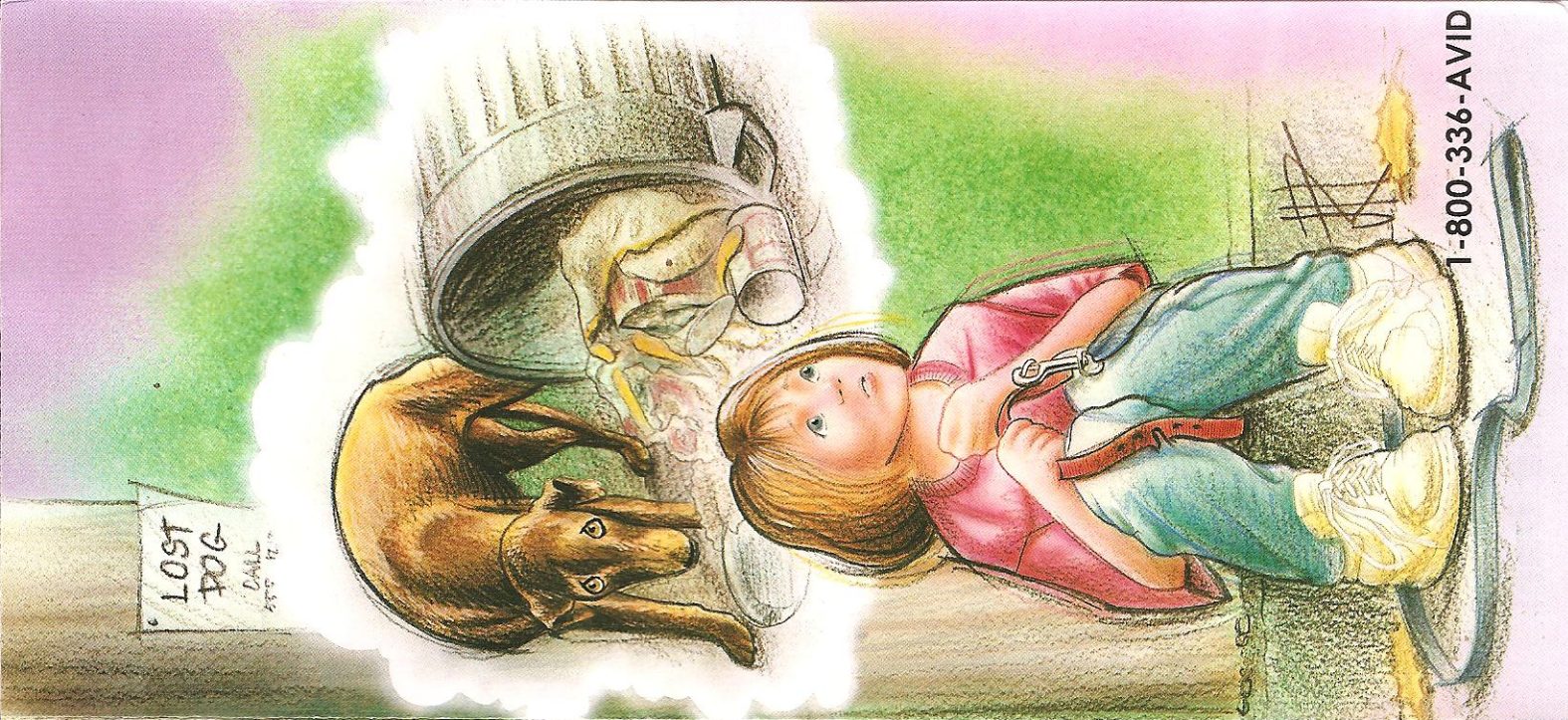
For Value Received, _____ hereby sell, assign and transfer unto _____

said animal represented by within Certificate.

Dated _____ 20 _____

In Presence of _____

1-800-336-AVID



Transferable only on the books of AVID by the holder hereof upon surrender of this certificate properly endorsed.

Owner	Address
-------	---------

The registered holder of said animal is

Veterinarian	Address
--------------	---------

has been permanently identified with the above number by

Pet Name	Species	Breed	Age	Sex	Color
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This certifies that

Certificate of Ownership



Friendship Number	Date
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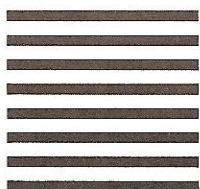


PETTRAC™
(Member of AVID Group)
3185 Hammer Ave.
Norco, CA 92860-9972

POSTAGE WILL BE PAID BY ADDRESSEE

BUSINESS REPLY MAIL
FIRST - CLASS MAIL PERMIT NO. 31 NORCO, CA

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



RABIES VACCINATION CERTIFICATE

NASPHV Form #50

Rabies Tag Number

Owner's Name & Address

Print - use ball point pen or type

PRINT - Last

First

M.I.

Telephone

No.

Street

City

State

Zip

Species:

Sex:

Age:

Size:

Predominant Breed:

Colors:

Dog ☒

Male ☐

3 mo. to 12 mo. ☐

Under 20 lbs. ☐

Sharpei

Black

Cat ☐

Female ☐

12 mo. or older ☐

20-50 lbs. ☐

Over 50 lbs. ☐

Name

Producer:

(First 3 letters)

☐

1 yr. Lic./Vacc.

☐

3 yr. Lic./Vacc.

Other

Vacc. Serial (lot) No.

For Licensing Agency Use
License No. Year

DATE VACCINATED:

3 3 09
Month Day Year

Veterinarian's: #

License No.

Other

Change ☐ Add ☐

Control No.

VACCINATION EXPIRES:

3 3 10
Month Day Year

Address

Signature

Spay and Neuter Clinic, Inc.
40 NE 13th Ave
Ft. Lauderdale, FL 33334
(954)202-4354

Account: 1203
Invoice: 3613
Date: 03/08/2009
Time: 3:33 PM
Page: 1

Florida Sharpe Rescue
5514 Nw 99 Terrace
Gainesville FL 32653

RAVEN
CANINE
Shar Pei
Tag: None

Age: N/A
Sex: FS

Phone: (352)332-3732 (352)339-3582

Doctor: Mary Moore, DVM

Date	Service/Item	Qty		Price	Amount
03/07/2009	Heartworm Treat under 40 lbs	1.00	D	400.00	400.00
03/07/2009	Torbugesic Inj/cc	0.60	D	18.00	10.80
03/08/2009	Torbugesic Inj/cc	0.50	D	18.00	9.00
03/08/2009	Cephalexin 500mg	14.00	D		14.00
	Discount				-130.14

Tax 0.00
Net Invoice 303.66
Previous Balance 0.00
Payment 303.66 (VISA)
Card

Balance Due 0.00

86.74

Refund.

433.80

214.90
TOTAL

Thank You

[D] 30% Discount Applied
Please tell your friends about Heroes' great service and value. Thank You!

St. Pete Beach Veterinary Clinic

6605 Gulf Blvd.
St. Pete Beach, FL 33706
727-367-0096

INVOICE

To treat and care for your pets with love and compassion.

FOR: Mr/Mrs. Susan Melton
6722 5th Ave N
St. Petersburg, FL 33710

Printed: 04-03-09 at 10:05a
Date: 04-03-09
Account: 2293
Invoice: 80066

Date	For	Qty	Description	Net Price	
Services by Kevin M Rose DVM					
04-03-09	Koda	1	Optimmune Ophthalmic Oint 3.5g	32.40 **	
04-03-09		1	Neo-Poly-Dex Opth Solution	11.70 **	
04-03-09	Raven	1	Examination	36.00 **	
04-03-09		1	Preanesthetic Profile in house	41.85 **	
04-03-09		1	T4	37.80 **	
04-03-09		1	Injection	18.00 **	
04-03-09		1	Skin Scraping	13.50 **	
04-03-09		1	Gram Stain	18.00 **	
04-03-09		1	Gentocin Topical Spray	19.35 **	
04-03-09		1	Otomax 15g	21.15 **	
Old balance				New balance	
0.00					
Charges		Payments		Discount	
249.75		0.00			
				27.75 **	
				249.75	

Your invoice total reflects our **10%** discount.

(No reminders are due for this patient.)

Reminders for: Koda (Weight: 51.0 lbs - 4y)		Last done
02-26-10	Canine Rabies 1yr	
02-26-10	Heartworm/Ehrlichia/Lyme	
02-26-10	Bordetella/Kennel Cough	
02-26-10	DHPP(no lept) Annual	

INVOICE

St. Pete Beach Veterinary Clinic

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St. Pete Beach, FL 33706
727-367-0096

To treat and care for your pets with love and compassion.

FOR: Mr/Mrs. Susan Melton
6722 5th Ave N
St. Petersburg, FL 33710

Printed: 04-28-09 at 12:26p
Date: 04-28-09
Account: 2293
Invoice: 81093

Date	For	Qty	Description	Net Price
Services by Kevin M Rose DVM				
04-28-09	Raven	1	Urinalysis	13.50 **
04-28-09		1	U/A Sediment	18.00 **
04-28-09		10	Baytril 68 mg	23.40 **
04-28-09		10	Diethylstilbestrol 1mg	11.70 **
04-28-09	Tigger	1	Immiticide 45-66 lbs.	157.50 **
04-28-09		1	Skin Scraping	13.50 **
04-28-09		1	T4	37.80 **

Old balance	Charges	Payments	Discount	New balance
89.55	275.40	0.00	30.60 **	364.95

Your invoice total reflects our **10%** discount.

Doctor's Instructions

Immiticide 45-66 lbs.

Heartworm disease is very serious and complications may arise during and after treatment. Please follow these instructions carefully to lessen the chances of problems developing.

- 1) Exercise: Tigger's activity must be severely restricted for the next 5 weeks. Short, on-leash walks are the only exercise allowed until both phases of the treatment have been completed. Also, prevent Tigger from engaging in vigorous or extended barking, rough play or other excitement.
- 2) Please notify the hospital if any of the following occur:
 - Tigger refuses to eat normally.
 - Tigger has diarrhea, vomiting or blood in the urine.
 - Tigger coughs frequently or has trouble breathing.

INVOICE

St. Pete Beach Veterinary Clinic

6605 Gulf Blvd.
St. Pete Beach, FL 33706
727-367-0096

To treat and care for your pets with love and compassion.

FOR: Mr/Mrs. Susan Melton
6722 5th Ave N
St. Petersburg, FL 33710

Printed: 05-22-09 at 4:34p
Date: 05-22-09
Account: 2293
Invoice: 82179

Date	For	Qty	Description	Net Price
Services by Dr. Dee Sheppard DVM				
05-22-09	Raven	1	Examination	36.00 **
05-22-09	TRUFFLES	1	Clean Wound	9.00 **
05-22-09	Truffles	1	Examination	36.00 **
05-22-09	RAVEN	1	1st View Radiograph	58.50 **
<hr/>				
Old balance	Charges	Payments	Discount	New balance
72.36	139.50	0.00	15.50 **	211.86

Your invoice total reflects our **10%** discount.

Reminders for: Truffles (Weight: 45.9 lbs - 4y)		Last done
05-15-10	Canine Rabies 1yr	05-15-09
05-15-10	DHPP(no lept) Annual	05-15-09
05-11-10	Heartworm/Ehrlichia/Lyme	

(No reminders are due for this patient.)

INVOICE

St. Pete Beach Veterinary Clinic

6605 Gulf Blvd.
St. Pete Beach, FL 33706
727-367-0096

To treat and care for your pets with love and compassion.

FOR: Mr/Mrs. Susan Melton
6722 5th Ave N
St. Petersburg, FL 33710

Printed: 04-28-09 at 12:26p
Date: 04-28-09
Account: 2293
Invoice: 81093

Date	For	Qty	Description	Net Price
Services by Kevin M Rose DVM				
04-28-09	Raven	1	Urinalysis	13.50 **
04-28-09		1	U/A Sediment	18.00 **
04-28-09		10	Baytril 68 mg	23.40 **
04-28-09		10	Diethylstilbestrol 1mg	11.70 **
04-28-09	Tigger	1	Immiticide 45-66 lbs.	157.50 **
04-28-09		1	Skin Scraping	13.50 **
04-28-09		1	T4	37.80 **
<hr/>				
Old balance	Charges	Payments	Discount	New balance
89.55	275.40	0.00	30.60 **	364.95

Your invoice total reflects our **10%** discount.

Doctor's Instructions

Immiticide 45-66 lbs.

Heartworm disease is very serious and complications may arise during and after treatment. Please follow these instructions carefully to lessen the chances of problems developing.

- 1) Exercise: Tigger's activity must be severely restricted for the next 5 weeks. Short, on-leash walks are the only exercise allowed until both phases of the treatment have been completed. Also, prevent Tigger from engaging in vigorous or extended barking, rough play or other excitement.
- 2) Please notify the hospital if any of the following occur:
 - Tigger refuses to eat normally.
 - Tigger has diarrhea, vomiting or blood in the urine.
 - Tigger coughs frequently or has trouble breathing.