

6902 Stirling Road
Davie, FL 33024
(954) 989-9879

SHAR-PEI FLORIDA RESCUE
1600 NW 25 STREET
SUNRISE, FL 33322

Client ID: 9379
Invoice #: 89229
Date: 12/12/2009

Patient ID:	77082	Weight:	27.70	pounds
Patient Name:	NO NAME	Birthday:	12/11/1910	
Species:	Canine	Sex:	Male	
Breed:	Shar Pei, Chinese			

	Description	Staff Name	Quantity	Total
2/12/2009	RE CANINE PACK B	Paul Hynes, DVM	1.00	\$0.00
	RE EXAM WITH FECAL		1.00	\$25.00
	RE RABIES VACCINE		1.00	\$12.00
	RE DA2PP		1.00	\$20.00
	RE BORDETELLA		1.00	\$12.00
	RE HEARTWORM EHRlichia AND LYM		1.00	\$32.00
	Package Discount		1.00	(\$13.00)
	Mallory was your technician today :)		1.00	\$0.00
	EAR MITE EVALUATION		1.00	\$15.00
	Owner Declines Heartworm Prevention-k9		1.00	\$0.00
Patient Subtotal:				\$103.00

Instructions

few pets may experience some lethargy and soreness from the vaccinations. If this persists longer than 24 hours, please call our office. If face swelling or vomiting occur call our office right away or take to nearest Animal Hospital.

PLEASE CONTACT US IF ANY CONCERNS 954-989-9879 UNTIL 6PM, FOR EMERGENCIES AFTER 6 PM CALL ANIMAL MEDICAL CENTER IN COOPER CITY AT 954-437-9630 OR HOLLYWOOD A.H. AT 954-920-3556

HEARTWORM DISEASE IS A SERIOUS AND POTENTIALLY FATAL CONDITION CAUSED BY PARASITIC WORMS LIVING IN THE ARTERIES OF THE LUNGS AND OCCASIONALLY IN THE RIGHT SIDE OF THE HEART OF DOGS. IT ONLY TAKES ONE MOSQUITO TO INFECT YOUR DOG, SO EVEN DOGS WHO ARE REDOMINATELY INDOORS ARE SUSCEPTIBLE TO HEARTWORM INFECTION. WHILE TREATMENT OF ANINE HEARTWORM DISEASE IS USUALLY SUCCESSFUL, PREVENTION OF THE DISEASE IS MUCH SAFER AND MUCH MORE ECONOMICAL!! WE RECOMMEND THAT YOU GET YOUR DOG ON MONTHLY PREVENTION AS SOON AS POSSIBLE. FOR MORE INFORMATION VISIT: WWW.HEARTWORMSOCIETY.ORG

Reminder

2/12/2010 RE RABIES VACCINE

Lake County Animal Services
28123 CR.561 Tavares ,Florida 32778
Phone 352-343-9688 Fax352-343-9665

Animal Medical Information

Animal ID: D-2011-1332	Name: SQUIRT
Species: Dog	Gender: Male
Breed, Pri: Shar-Pei	Breed, Sec: Shar-Pei
Color, Pri: Black	Color, Sec:

Medical Treatments:

Medical Treatment	Requested Date	Performed Date	Test Outcome
BORDETELLA	2/23/2011	2/23/2011	
DH2PP	2/23/2011	2/23/2011	
Heart Worm Test	2/23/2011	2/23/2011	Negative
PARVO TEST	2/23/2011	2/23/2011	Negative
RABIES VAC 1 YEAR	2/23/2011	2/23/2011	
Worming	2/23/2011	2/23/2011	



Lake County Animal Services
28123 CR.561 Tavares ,Florida 32778
Phone 352-343-9688 Fax352-343-9665

Rabies Certificate

Date: 2/23/2011
Time: 9:11 AM

Animal: SQUIRT
Animal Type: Dog
Animal Ref. Id: D-2011-1332
Gender: Male
Altered: No
Primary Breed: Shar-Pei
Secondary Breed: Shar-Pei
Age: 5 - 6
Primary Color: Black
Secondary Color:
Coat Pattern:
Coat Description:
Description:

Owner:**Address:****Phone:**

Rescue, Florida Chinese
Shar-Pei
5514 NW 99th Terrace
Gainesville, FL
352-332-3732

Vaccination Details

Vaccination Given: 2/23/2011
Vaccination Expires: 2/23/2012
Vaccination Name: RABIES
Vaccination Manufacturer: FTD
Vaccine Type: KILLED
Vaccine Lot No.: 873199A
Vaccine Serial No.: 8731B
Veterinarian: Vinton, Dr. Yvette
Veterinarian's Phone #: 352-343-9688

RABIES TAG NUMBER**ISSUE DATE**
2/23/2011**EXPIRATION DATE**
2/23/2012

Rabies Text

Veterinarian
Date:

Dr. Y. Vinton
2-23-11

Maricamp Animal Clinic

4485 SE 53rd Ave.
Ocala, FL 34480
352-624-0300

INVOICE

"Our Goal Is To Make Your Pet Happy"

FOR: Mr/Mrs. Kathy Vallance
37 Bahia Trace Course
Ocala, FL 34472

Printed: 02-25-11 at 11:05a
Date: 02-25-11
Account: 6668
Invoice: 210216

Date	For	Qty	Description	Price	Discount	Net Price
Services by Lee Kierstein, DVM						
02-24-11	Squirt	1	Ear Swab	16.50	16.50	0.00 **
02-24-11		1	Pre-Anesth IV Cath/Fluids			36.00
02-24-11		1	Examination .Recheck/Brief			28.00
02-24-11		1	Injection-Pain Buprenex 5-20 lbs			17.50
02-24-11		1	Neuter K-9 <50			90.00
02-24-11		1	Nail Trim-Courtesy (8.00)			0.00
02-24-11		7	Rimadyl 100mg (carprofen)			12.04
02-25-11		1	Micro Chip Implant w/ Surgical Proc			33.00
02-25-11			Visa payment			-216.54
<hr/>						
Old balance		Charges	Payments	Discount	New balance	
0.00		216.54	216.54	16.50 **	0.00	

Your invoice total reflects our **(unnamed)** discount.

Reminders for: **Squirt**

Last done

02-23-12 Bordetella (inj.) Vacc. Annual
02-23-12 Rabies Canine 3yrs Booster
02-23-12 Dhlp Yearly Booster
02-23-12 Heartworm Test

8 Rx Dron/Al 136 mg tabs

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Printed: 02-25-11 at 11:19a
Date: 02-25-11
Account: 6668
Invoice: 210220

Date	For	Qty	Description	Price	Discount	Net Price
02-25-11	Squirt	1	Drontal 136 (Lrg dog)			25.00
02-25-11			Visa payment			-25.00

Old balance	Charges	Payments	New balance
0.00	25.00	25.00	0.00

Reminders for: **Squirt**

Last done

02-23-12	Bordetella (inj.) Vacc. Annual
02-23-12	Rabies Canine 3yrs Booster
02-23-12	Dhlpp Yearly Booster
02-23-12	Heartworm Test

resQ
PET TRACKING SYSTEM



981020003901197 981

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INVOICE

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Ocala, FL 34480
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"Our Goal Is To Make Your Pet Happy"

FOR: Mr/Mrs. Kathy Vallance
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Ocala, FL 34472

Printed: 03-11-11 at 12:17p
Date: 03-11-11
Account: 6668
Invoice: 210572

Date	For	Qty	Description	Price	Discount	Net Price
Services by Lee Kierstein, DVM						
03-11-11	Barney	4	Examination - Recheck/Brief			26.00
03-11-11		2	Rimadyl 100mg (carprofen)			8.00
03-11-11		7	Caplet Simplicef 100 mg			12.00
03-11-11	Squirt	1	Inj Pain Buprenex-20-80 lbs			26.00
03-11-11		1	Entropion (L) eye			120.00
03-11-11		1	Anesthesia Iso 0-30 min.			72.00
03-11-11		7	Rimadyl 100mg (carprofen)			12.04
03-11-11		1	Triple Opth. plain			23.00
03-11-11			Visa payment			151.04
03-11-11			Visa payment			-150.00
Old balance						New balance
0.00						0.00
Charges						
301.64						
Payments						
301.64						

Reminders for: Squirt

Last done

02-23-12	Bordetella (inj.) Vacc. Annual
02-23-12	Rabies Canine 3yrs Booster
02-23-12	Dhlpp Yearly Booster
02-23-12	Heartworm Test

(No reminders are due for this patient.)

BOARD OF COUNTY COMMISSIONERS

42301

Lake County Animal Services
28123 CR 561, Tavares, FL 32778-9490
(352) 343-9689

Date: 02-24-11Received of: Name FL Sharpei Rescue For _____

Address _____

Telephone _____ DL# _____

- Fees:
- ☐ Penalty (up to _____).....\$ _____
 - ☐ Board _____ days at \$ _____ per day.....\$ _____
 - ☒ Initial examination within five days, and rabies vaccination to be administered by a Lake County licensed veterinarian to the animal adopted. (Participating veterinarians may charge extra for some procedures).....\$ 100.00
 - ☐ Rabies vaccination to be administered by a Lake County licensed veterinarian to the animal reclaimed.....\$ _____
 - ☒ Individual License (Tag issued upon proof of rabies vaccination.) Owners will be responsible for the service charge retained by the veterinarian.....\$ 00.00
 - ☒ Sterilization fee covering pre-op exam, surgery and suture removal by a Lake County licensed veterinarian. Surgery required as specified on Sterilization Certificate.....\$ 0.00
 - ☐ Donation.....\$ _____
 - ☐ Transportation.....\$ 40.00
 - ☒ Other TEST + VACC.....\$ 50.00
- TOTAL \$ 50.00

Description of animal: ☒ Dog ☐ Cat ☐ Male ☐ Female Name D-2011-1332
Breed Sharpei Color BK
Size: ☐ Sm. ☐ Med. ☐ Lg. ☐ X-Lg. Coat: ☐ Short ☐ Med. ☐ Long Approx. Age 6y
Run# 43A Cage# _____ I.D.# _____ Heart worms (+) (-) ☐ Preventative
Date of rabies: 02/24/11
Participating Hospital/Clinic _____

As Owner, I am reclaiming the above-described animal. _____

Owner's Signature _____

For the purpose of reclaiming the above-described animal, I am the authorized agent of

Owner's Name _____

Authorized agent's signature _____

I absolve Lake County Animal Services and/or the Lake County Board of County Commissioners of any responsibility for the health or temperament of the above-described animal.

I understand it is advisable to consult a licensed veterinarian as soon as possible.

I agree to be responsible for any additional charges for services that may be required/recommended and performed by a licensed veterinarian, including but not limited to the heartworm test.

I agree to be responsible for an additional \$10.00 to the licensed veterinarian, if the female is pregnant, in heat, or weighs (60) pounds or more at the time of spaying.

*This fee is collected pursuant to Florida Statutes Section 823.15 and Lake County Ordinance 1999-65. All mature animals are required to be sterilized prior to release unless a licensed veterinarian has stated that the animal you wish to adopt should not be sterilized prior to release, or that the animal lacks sufficient maturity for sterilization surgery. Florida Law requires that you have the animal sterilized prior the animal's sexual maturity. The attached portion at the bottom of this form is to be used for this purpose.

I understand that failure to have the animal sterilized may result in any or all of the following:

1. Forfeiture of any deposit for sterilization surgery.
2. Confiscation of the animal by Lake County Animal Services.
3. Conviction of a noncriminal violation punishable by a fine.

I understand the original copy of this receipt must accompany any request for a refund or transfer.

I understand the adoption fees will be refunded only if a licensed veterinarian has termed the adopted animal unhealthy within (15) days from the date of the adoption, provided services have not been performed.

I understand the adoption fees may be transferred if the adopted animal is returned within (5) days from the date of adoption and has not been examined by a licensed veterinarian.

I have read, understood, and agree to the above statements and responsibilities.

Adopter [Signature]Animal Services Employee [Signature]

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