

## Veterinary Health Certificate for Export of Dogs and Cats from the United States of America to Cameroon



<b>Veterinary Authority</b> UNITED STATES DEPARTMENT OF AGRICULTURE	<b>Date Of Issue</b>	<b>Certificate Number</b>
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<b>1. Consignor:</b>	<b>2. Consignee:</b>
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<b>3. Country Of Origin:</b> USA	<b>4. State Of Origin:</b>
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<b>5. Country Of Destination:</b> Cameroon	<b>6. Zone Of Destination:</b> *****
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<b>7. Place Of Origin:</b>	<b>8. Port Of Embarkation / Border Crossing:</b>
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<b>9. Estimated Date Of Shipment:</b>	<b>10. Means Of Transport:</b>
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<b>11.</b> *****	<b>12. CITES Permit Number:</b> *****
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<b>13. Description Of Commodity:</b> Dogs and Cats	<b>14. Date Of Inspection:</b>
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<b>15. Total Quantity:</b>	<b>16. Additional Information:</b>
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<b>17. Total Number Of Packages/Containers:</b>
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<b>18. Identification / Seal Numbers:</b>
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<b>19. Commodities Intended Use:</b> N/A	<b>20. Type Of Admission:</b>
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<b>21. Identification Of Commodities:</b>  (See next page)  ***** ***** *****
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**21. Identification Of Commodities: Continued**

NAME	MICROCHIP NUMBER	BREED	AGE	SEX	COLOR OR DISTINCTIVE MARKS

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**Certification Statements:**

I, the undersigned USDA accredited veterinarian, certify the following:

1. I have verified the presence of the microchip numbers listed in box 21.
  
2. The animals described in box 21 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 animals or other animals or would endanger public health, including rabies.
  
3. To my knowledge, the animals for export originated from a premises not quarantined for rabies and have not been exposed to rabies.
  
4. The animals for export are current on rabies vaccinations at the time of export, as listed in the table below.

This certificate is valid for 30 days after issuance.

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**Rabies Vaccination Table**

MICROCHIP NUMBER	Date of Rabies Vaccination	Name of Vaccine	Vaccine Batch Number	End Date of Vaccination Period of Validity

**Name of Accredited Veterinarian**

**Name of USDA Veterinarian**

**Signature of Accredited Veterinarian**

**Signature of USDA Veterinarian**

**Date**

**Date**