2022 COUNTY COMPANION ANIMAL DAY CERTIFICATE OF VACCINATION for CATS and FERRETS

Exhibitor's Name		County	
Address			
	Sox)		(Zip)
Pet's Name	Age _	Birth Date	
			(Month/Day/Year)
Male [] Female [] Spa	yed/Neutered [] Species/Bree	ed	
Color/Markings			
THE INFORMATION O	BELOW IS TO BE COMPL	ETED & SIGNED BY	VOLID VETERINARIAN
VACCINATIONS REQUIRED* FOR FERRETS: All required vaccina		COUNTY COMPANION ANII d veterinarian and must be	MAL DAY JUDGING for CATS and current through
Feline Vaccinations	Date Vaccination Given	Ferret Vaccinations	Date Vaccination Given
Rabies – 1 year or 3 yrs. (circle o	ne)	Rabies – 1 yr. or 3 yrs. (circle one)	
Must list Rabies Tag No.		Must List Rabies Tag No.	
Panleukopenia (FPL)		Canine Distemper (CDV)	
Viral Rhinotracheitis (PVR)			
Calcivirus (FCV)			
Feline Leukemia (FeLV) - recommended			
	e above vaccination requirements maination is waived, please state the i		he veterinarian's recommendations V is recommended, not required.
I hereby verify that I am a licensed	d veterinarian and have vaccinated	the above cat or ferret.	
Clinic Name		Clinic Phone ()	
			Zip
	e		
Veterinarian's Signature			

Note: This is for county use only. Lives animals are not permitted at Ohio State Fair Companion Animal Day.