

CERTIFICATE OF VETERINARY INSPECTION

Certificate Number

43102661607979052

Contact State of Destination for Movement Requirements and Certificate Validity
FOR FOREIGN SHIPMENTS (Outside United States or Leaving United States) USE FEDERAL FORM

OFFICIAL USE ONLY: The Veterinarian issuing this certificate is accredited and has been authorized to inspect animals and issue certificates.

ENTRY PERMIT #: MERRY CHRISTMAS

INSPECTION DATE: 12/17/2020		SHIPMENT DATE: 12/24/2020		<input checked="" type="radio"/> Large Animal		<input type="radio"/> Small Animal													
CONSIGNOR - Contact Person at Origin				CONSIGNEE - Contact Person at Destination				CARRIER (Transporter)											
First Name		Last Name		AND/OR		First Name		Last Name		AND/OR		Business Name							
SANTA		CLAUS		AND/OR		SANTA		CLAUS		AND/OR		REINDEER SLEIGH							
Business Name				Business Name				Physical Address											
KRIS KRINGLE & ASSOCIATES				CHILDREN ACROSS MISSOURI				325 SANTA CLAUS LANE											
Physical Address of Animals				Physical Address of Animals				City		State		Zip Code		Phone Number					
325 SANTA CLAUS LANE				ALL MISSOURI COUNTIES				NORTH POLE				88888							
City		State		Zip Code		County		City		State		Zip Code		County					
NORTH POLE				88888		RANDOLPH		EVERYWHERE		MO		60000							
Phone Number				Location ID#				Phone Number				Location ID#							
(951) 262-3026																			
Consignor's Address (if different)				Consignee's Address (if different)				<input type="checkbox"/> Print <input type="checkbox"/> Reconsigned				Transport Method				Purpose of Movement			
												OTHER (SPECIFY) SLEIGH				OTHER (SPECIFY) DELIVE			
												<input checked="" type="checkbox"/> Interstate				<input type="checkbox"/> Intrastate			

Disease Certification Statements	THE HERD IS ENROLLED IN THE NORTH POLE CWD VOLUNTARY HERD CERTIFICATION PROGRAM AND HAS ACHIEVED FULLY CERTIFIED STATUS.	Flock/Herd Accredited Free For: Herd/Flock # _____	<input checked="" type="checkbox"/> Tuberculosis	<input checked="" type="checkbox"/> Brucellosis	<input type="checkbox"/> Scrapie	<input type="checkbox"/> NPIP	<input type="checkbox"/> Johne's	<input type="checkbox"/> PRV	<input checked="" type="checkbox"/> CWD	<input type="checkbox"/> Other (specify) _____	Current State/Area Status: Tuberculosis: Free Brucellosis: Free <input type="checkbox"/> Other (specify) _____			
	THE NORTH POLE IS FREE OF FOOT-AND-MOUTH DISEASE, RINDERPEST, CONTAGIOUS PLEUROPNEUMONIA, AND SURRA.													

SPECIES	# OF HEAD	OFFICIAL PERMANENT ID	OTHER ID (REGISTRY NAME, NUMBER OR DESCRIPTION)	AGE	SEX	BREED	TB DATE OBSVD	TB TEST RESULT	BRUC TEST DATE	BRUC TEST RESULT	BRUC VACC TATTOO	EIA TEST DATE	EIA LAB NAME	EIA TEST RESULT	OTHER TESTS, VACCINATIONS/TREATMENT. PLEASE LIST DATE & PRODUCT USED
CERVID	1	DASHER	DASH 1	Y	F	OTHER						N/A	N/A	N/A	
CERVID	1	DANCER	DANC 2	Y	F	OTHER						N/A	N/A	N/A	
CERVID	1	PRANCER	PRAN 3	Y	F	OTHER						N/A	N/A	N/A	
CERVID	1	VIXEN	VIXE 4	Y	F	OTHER						N/A	N/A	N/A	
CERVID	1	COMET	COME 5	Y	F	OTHER						N/A	N/A	N/A	
CERVID	1	CUPID	CUPI 6	Y	F	OTHER						N/A	N/A	N/A	
CERVID	1	DONNER	DONN 7	Y	F	OTHER						N/A	N/A	N/A	
CERVID	1	BLITZEN	BLITZ 8	Y	F	OTHER						N/A	N/A	N/A	
CERVID	1	RUDOLPH	RUDO 9	Y	M	OTHER						N/A	N/A	N/A	Confirmed: Most famous reindeer of all
TOTAL	9														

Date Field Dec 17, 2020

Certificate Signed by: Hermey Elf, DVM

Date 12/17/2020

Certificate is only valid for 30 days from inspection.

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(573)751-3377

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OWNER/AGENT STATEMENT "The animals in this shipment are those certified to and listed on this certificate."	VETERINARY CERTIFICATION - I certify, as an accredited veterinarian that the above described animals have been inspected by me and that they are not showing signs of infectious, contagious and/or communicable disease (except where noted). The vaccinations and results of tests are indicated on the certificate. To the best of my knowledge, the animals listed on this certificate meet the state of destination and federal interstate requirements. No further warranty is made or implied.			
	Date 12/14/2020	Printed Name <u>Hermev Elf, DVM</u>	Phone (573) 751-3377	Email <u>hermevelf@NP.gov</u>
DATE	Address <u>326 Santa Claus Lane</u>	City <u>North Pole</u>	State _____	Zip <u>88888</u>
SIGNATURE	USDA Accreditation # <u>010266</u>	State of License _____	License # <u>0005969</u>	
	Signature <u>Hermev Elf, DVM</u>			

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Certificate Signed by: Hermev Elf, DVM

Date 12/14/2020

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