



Health Certificate & Guarantee

Date: ___/___/___ AKC Registration number _____

Puppy's Name _____ born on ___/___/___

Color _____ M/F _____ Breed _____

Health Statement: Unless noted otherwise below, at the time of the exam the puppies were free of signs and symptoms of overt disease. No claims are being made in regard to any congenital or inheritable disorders, which may arise at a later time. Nor are any claims being made for any illnesses or injuries, which may arise after the time of this exam. This exam is being performed using auscultation of the heart and lungs, external examination of the eyes, eyelids and ears (no otoscope or ophthalmoscope), and palpation.

Vaccination Statement: Buyer is responsible to confirm vaccination status from Seller and for any required booster shots. If vaccines are given at time of exam, at least 1 booster shot is needed 3 weeks later. Similarly, deworming should also be continued in 2-3 week increments until 3 months of age (minimum).

Internal Parasite Statement: Buyer is responsible to confirm deworming status from Seller. No fecal exams were performed at the time of this exam. Buyer is requested to have fecal exams performed by their veterinarian as soon as possible. Internal parasites can constitute a human health risk.

Exam: The pup was examined for the following: Eyes, Ears, Nose, Musculoskeletal, Fontanel, Bite, Heart, Lungs, Abdomen, Skin, Patella, Urogenital, and Hernias. All items listed above were functioning within the normal limits.

Vaccinated/Dewormed: The pup was vaccinated and dewormed.

We hope you enjoy the puppy that we have raised and helped you to choose.
We would love if you would share pictures of the pups as they grow!

Printed Name: _____

Signature: _____ Date: ___/___/___

I agree to the above stated health guarantee.