STATE OF PENNSYLVANIA Number Contact State of destination Valid for 30 days following the Page # date of inspection of the animal(s) for current movement **CERTIFICATE OF VETERINARY INSPECTION** 23PA450829 1/1 requirements. identified on the document. Livestock and Poultry Use Federal Forms for Foreign Shipments Destination Carrier Inspection Origin 08/14/2023 Flashpoint Bloodstock LLC Ray Martin Date 275 Battleview Terrace 230 Airport Rd Issue 08/18/2023 Charles Town, WV 25414 Date Shippensburg, PA 17257 (717) 448-6088 Shipment Date Consignor Consignee Flashpoint Bloodstock LLC Ray Martin **Entry Permit Number** 230 Airport Rd 275 Battleview Terrace Charles Town, WV 25414 Shippensburg, PA 17257 (717) 448-6088 PURPOSE OF SHIPMENT Interstate Sale **SPECIES** NUMBER OF ANIMALS STATE/AREA STATUS HERD/FLOCK STATUS Equine / VACCINATION(S) INDIVIDUAL ANIMAL IDENTIFICATION TEST(S) Laboratory Key Disease Key REGISTRY NAME AND NUMBER **BREED AGE** SEX FEDERAL EARTAG #, **EIA - Equine Infectious Anemia PRODUCT** DATE A - Larch Hill Laboratory OR REGISTRATION TATTOO, Ι INFO. OF DESCRIPTION AND Ν Μ VACC. REGISTERED OWNERSHIP OTHER PERMANENT Ε IDENTIFICATION BRAND Date Remarks Serial# Accession Lab Results Sampled AGID Call Name: Done in Awe Miniature Horse 99.7 EIA 673462 08/14/2023 2 3 VETERINARY CERTIFICATION - I certify, as an accredited veterinarian, that the above described animals have been STATE CERTIFICATION REQUIREMENTS 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. Signature Dr. Shannon Oliver Electronically signed through USDA VSPS 02:27 PM EDT The issuing accredited veterinarian has been level-2 eAuthenticated and is accredited in the issuing State. The paper copy accompanying the shipment must be signed by the issuing veterinarian. **OWNER/AGENT STATEMENT** (Where applicable) The animals in this shipment are those certified to and listed on this certificate." BV013125 Print Name Shannon Oliver License # **Century Equine Veterinary Services** Nat'l Accred# 066465 Address Date 4165 Guilford Springs Rd

OSP E 02 73894

Phone# (717) 360-6035

Chambersburg, PA 17202