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BRAD LITTLE, GOVERNOR
CHANEL TEWALT, DIRECTOR

TEST CHART# _____



IDAHO DIVISION OF ANIMAL INDUSTRIES
ADULT VACCINATION PERMIT

DATE: _____ AV PERMIT NO. _____

OWNER: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

DESCRIPTION:

AGE _____ BREED _____ # HEAD _____

OFFICIAL MARKINGS:

TATTOO _____ SILVER TAGS _____

DATE BLED: _____ VETERINARIAN: _____

ISSUED BY: _____