

RE: 1705-19166/DJS/ATTACHMENT 7

Reply: Reply from Henri Pelletier of Gotier Siamese on 5/3 : Gotier Siamese about your two Siamese male kittens on 5/2

2 messages

Henri Pelletier <gotier2@aol.com>
To: tiamapesgonnella@gmail.com

Wed, May 3, 2017 at 8:18 AM

The world did not end Tia. God bless you and I am so sorry you encountered so much trouble. They are PIA to deal with at Western. I know!!

I shall watch for the mail and will now schedule the flight. I also called my Veterinarian as I must now secure two new health certificates as the two issued will expire on 5/9/17 and the airline will not accept them if the certificate is not current within ten business days. Mine will be 11 days on 5/10. If not one thing, always another.

We will get this done and God bless. Did you like the pedigree sent?

Regards,
Henri

-----Original Message-----

From: Henri Pelletier <gotier2@aol.com>
To: tiamapesgonnella <tiamapesgonnella@gmail.com>
Sent: Thu, May 4, 2017 3:11 pm
Subject: Reply: Kittens parents

Oye did I screw up!

Hi Tia,

First of all I have been on the money that the litter is from Nureyev but wrong with the Dam. Mom is Gotier Kinta.

I had the boys envelopes on their papers reversed by the Vet's staff when I took them in for their health certificates. Anyway just now I was looking at the papers realized they switched the papers when putting them back they put the wrong papers in each envelope. Long story long Whoopee. Great Mom, lovely lads. The as Nureyev's kittens all look like him!! Amazing the family resemblance.

Later,
Henri

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control numbers for this information collection are 0579-0036 and 0579-0333. The time required to complete this information collection is estimated to average 25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

No dog, cat, nonhuman primate, or additional kinds or classes of animals designated by USDA regulation shall be delivered to any intermediate handler or carrier for transportation in commerce, unless accompanied by a health certificate executed and issued by a licensed veterinarian (7 U.S.C. 2143.9, CFR, Subchapter A, Part 2).

OMB APPROVED
0579-0036
0579-0333

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
**UNITED STATES INTERSTATE AND INTERNATIONAL
CERTIFICATE OF HEALTH EXAMINATION
FOR SMALL ANIMALS**

WARNING: Anyone who makes a false, fictitious, or fraudulent statement on this document or uses such document knowing it to be false, fictitious, or fraudulent may be subject to a fine of not more than \$10,000 or imprisonment of not more than 5 years or both (18 U.S.C. 1001).

1. TYPE OF ANIMAL SHIPPED (select one only)
 Dog Cat Other
 Nonhuman Primate Ferret Rodent

2. CERTIFICATE NUMBER - OFFICIAL USE ONLY

3. TOTAL NUMBER OF ANIMALS
ONE

4. PAGE
ONE

5. NAME, ADDRESS, AND TELEPHONE NUMBER OF OWNER (CONSIGNOR)
 HENRI PELLETER
 304 SW 13TH STREET
 FORT LAUDERDALE, FLORIDA 33315
 (954)524-1747

6. NAME, ADDRESS, AND TELEPHONE NUMBER OF RECIPIENT AT DESTINATION (CONSIGNEE)
 TIA Gonnella
 4290 W Ford Rd
 Cincinnati, Ohio 45247

USDA License/ or Registration Number (if applicable)

7. ANIMAL IDENTIFICATION

NAME, AND/OR TATTOO NUMBER OR OTHER IDENTIFICATION	BREED - COMMON OR SCIENTIFIC NAME	AGE	SEX	COLOR OR DISTINCTIVE MARKS OR MICROCHIP
(1) KITTEN	SIAMESE	11 weeks	male	seal point
(2)				
(3)				
(4)				
(5)				
(6)				

8. PERTINENT VACCINATION, TREATMENT, AND TESTING HISTORY

RABIES VACCINATION		OTHER VACCINATIONS, TREATMENT, AND/OR TESTS AND RESULTS	
<input type="checkbox"/> 1 YEAR	<input type="checkbox"/> 2 YEARS <input type="checkbox"/> 3 YEARS	Date	Product Type and/or Results
Vaccination Date		03/05/2017	***TOO YOUNG***
Product		03/26/2017	1st Rhinotracheitis-calici panleukopenia booster
			2nd Rhinotracheitis-calici panleukopenia booster
		03/31/2017	Fecal Float-Negative

9. REMARKS OR ADDITIONAL CERTIFICATION STATEMENTS (WHEN REQUIRED)
 Deswormed with Droncit by breeder. Administered on March 5th and 26th
 Vaccines are done by breeder
 Kitten was tested negative for Fely & Fiv

VETERINARY CERTIFICATION: I certify that the animals described in box 7 have been examined by me this date, that the information provided in box 8 is true and accurate to the best of my knowledge, and that the following findings have been made ("X" applicable statements).

I have verified the presence of the microchip, if a microchip is listed in box 7.

I certify that the animal(s) described above and on continuation sheet(s), if applicable, have been inspected by me on this date and appear to be free of any infectious or contagious diseases and to the best of my knowledge, exposure thereto, which would endanger the animal or other animals or would endanger public health.

To my knowledge, the animal(s) described above and on continuation sheet(s) if applicable, originated from an area not quarantined for rabies and has/have not been exposed to rabies.

ENDORSEMENT FOR INTERNATIONAL EXPORT (IF NEEDED)
 PRINTED NAME OF USDA VETERINARIAN

NAME, ADDRESS, AND TELEPHONE NUMBER OF ISSUING VETERINARIAN
Gentle Care Animal Hospital
DR. COX • DR. CORDS • DR RAFUSE
 1020 E. Broward Blvd.
 Fort Lauderdale, FL 33301
 (954) 524-1111

LICENSE NUMBER AND STATE
 FL 2600

Accredited Yes No
 If yes, please complete below
 NATIONAL ACCREDITATION NUMBER
 063225

SIGNATURE OF USDA VETERINARIAN Apply USDA Seal or Stamp here DATE

NOTE: International shipments may require certification by an accredited veterinarian.
 SIGNATURE OF ISSUING VETERINARIAN
 DATE
 03May2017