Name (Pet Shop)
Address
City, State, Zip
Telephone
AW License ID #

## Disclosures

Date Received: _____ Cage/Kennel Number: _____ Breed: _____ Color: _____

Age: _____ Date of Birth: _____ Sex: M F NM SF Spay/Neuter Date: _____

Price: _____ Other Fees & Charges: _____ Microchip#: _____

Breeder Name: _____ Illinois License # _____

Mailing Address: _____ USDA License # _____

City, State, Zip: _____

Congenital/hereditary disease of parents or offspring, if any: _____

Pedigree Registration: Sire #_____ Dam #_____

Address of pedigree registry: _____

If dog or cat returned by customer, date and reason for return: _____

Inoculations and treatments of this animal since the date received:

| Vaccinations/Inoculations | Product | Date |
|---|---|---|
| ☐ Rabies | _____ | _____ |
| ☐ K-9 Distemper/Parvo | _____ | _____ |
| ☐ FVRCP | _____ | _____ |
| ☐ FELV | _____ | _____ |
| ☐ Bordetella | _____ | _____ |
| ☐ Other | _____ | _____ |

| Diagnostic Tests | Date | Results |
|---|---|---|
| ☐ Fecal | _____ | _____ |
| ☐ Parvo | _____ | _____ |
| ☐ Heartworm | _____ | _____ |
| ☐ FELV/FIV | _____ | _____ |
| ☐ Other | _____ | _____ |
| _____ | _____ | _____ |

| Dewormers/Medications | Dosage | Date | Date | Date | Date | Date | Date | Date | Date |
|---|---|---|---|---|---|---|---|---|---|
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Additional information may be included on a separate sheet

Remarks: _____

_____

_____

A copy of our policy regarding warranties, refunds, or returns is available upon request.

## Acknowledgement of Disclosures

I hereby attest that all of the above information is true and correct to the best of my knowledge.

(Pet Shop) Staff: _____ _____ _____
Print Name Signature Date

I hereby attest that this disclosure was posted on or near the cage of the dog or cat for sale and that I have read all the disclosures. I further understand that I am entitled to keep a signed copy of this disclosure.

Customer: _____ _____ _____
Print Name Signature Date

Original: Pet Shop Copy: Customer