## **OCALA BREEDERS' SALES COMPANY**

P.O. Box 99 Ocala, FL 34478 (352) 237-2154 Fax: (352) 237-3566 E-mail: obs@obssales.com Website: obssales.com

## **VACCINATION FORM**

Sale:	Consignor:_		
Horse(s) rep	presented on this certificate of Veterinary Insp	pection:	
	iginated from a barn with a confirmed or sus signs suggestive of these diseases, nor have be		0 /
	iginated from nor been stabled on a premise unise which has had herpes virus diagnosed du		
Have been v	vaccinated against EHV-1 no less than 14 days	s and no greater than 90 day	s.
<u>Hip #</u>	Sire/Dam	Vaccination type (product name)	<u>Date</u>
Date:			
Veterinarian: Printed Name:			