



KANOSAK K-9 TRAINING CENTER

"A Little Alaskan Gold"

I certify that _____ (dog's name) owned

by _____ has been vaccinated against:

Distemper _____ (date)

Parvo _____ (date)

Bordetella _____ (date)

Rabies _____ (date) Circle 1 yr / 3 yr

Fecal test negative _____ (date)

Signature of DVM

KANOSAK CANINE TRAINING
17318 BARBER GREENE ROAD
MAPLE PARK, IL 60151
PHONE 815-899-4335
kanosakdogs@gmail.com
Kanosak.com