VETERINARY HEALTH CERTIFICATE / VETERINÁRNE OSVEDČENIE

I, the undersigned veterinarian _____ ,

I certify that I have examined the animals (species guinea pig/ cavy) listed below and found them to be **clinically healthy**.

Owner of cavies, address:_____

No.	Breed	Class	Sex	Color

Dated _____ in _____

* Guinea pig (cavy) that did not pass the veterinary inspection must be crossed out from the list (the whole line crossed out).

_____

stamp and signature of the veterinarian