

Pet Name: DBV Heidelberg (Accios25)

Date of birth: ± 2024

☒ MALE ☐ FEMALE ☐ DOG ☒ CAT

Colour: Tabby & white

Breed: DLH

Distinguishing features:

Microchip number:

Microchip implant date: REGISTERED

Name of owner:

Contact number:

Physical address:

STERILISATION CERTIFICATE

This is to certify that the animal above

Was sterilised on: _____

By Dr: _____

Vet Signature: _____

9/22/2026

For Animal Use Only
FELOCELL® 4
Ref. No. 0203 (act 5019)
Teline Riktoripentite-
Cialis Pentakapenta-
Chlamydia Piliact Vaccine
Modified Live Chlamydia
1 dose V0242201 B23



Signature of veterinarian: [Signature]

9/22/2010

Date: _____
Vaccine name and batch number: _____

Signature of veterinarian: _____
Next vaccination: _____

Date: _____
Vaccine name and batch number: _____

Signature of veterinarian: _____
Next vacch: _____