The WellPet Center

5910 FM 1463 Katy, Texas 77494

Fax: 888-281-9442

info@thewellpetcenter.com Estimated Treatment Plan www.thewellpetcenter.com

Tel: 281-394-2355

Small Paws Pet Rescue Katy, Texas 77494

*This is an estimate 'DO NOT PAY'

Client Name: Small Paws Pet Rescue Treatment Plan: Jun 19, 2019

Description	Low Qty	Low Ext	High Qty	High Ext
Boarding - Canine Efficiency Condo (Medium, BOTTOM)	14.00	392.00	14.00	392.00
Boarding Bath - Canine - Small (<25 lbs)	3.00	90.00	3.00	90.00
Rx - Limeplus Pet Dip 4oz	3.00	39.03	3.00	39.03
Rabies Vaccine 1 Year	1.00	20.00	1.00	20.00
Rx - Apoquel 5.4mg Tablets (per pill)	14.00	46.26	14.00	46.26
Rx - Cefpodoxime 100mg Tablets	7.00	26.45	7.00	26.45
Rx - Panacur Granules (Per Gram/10lb)	7.50	33.80	7.50	33.80
Rx - Nexgard K9 10.1-24lb FREE DOSE	1.00	0.00	1.00	0.00
Rx - Heartgard Puppy Starter Kit <25lb (Free)	1.00	0.00	1.00	0.00
Rx - K9 Revolution 10.1-20 lbs Single	1.00	20.70	1.00	20.70
Grooming - Canine Full Groom/Summer Cut - Medium dogs (11-35lbs)	1.00	62.00	1.00	62.00
Anesthesia/Sedation - With Reversal <25 Pounds	1.00	75.56	1.00	75.56
House Lab - Cytology - Skin Scraping	1.00	41.26	1.00	41.26
CV - Leptospirosis (CGIP) 1Y	1.00	18.90	1.00	18.90
CV - Parvo - Puppy 4	1.00	14.50	1.00	14.50
CV - Distemper, Hepititis, Para. Puppy 4	1.00	17.90	1.00	17.90
CV - Canine Influenza (H3N8) Vaccine 1Y	1.00	24.90	1.00	24.90
CV - Canine Influenza (H3N2) Vaccine 1Y	1.00	24.90	1.00	24.90
CV - Bordetella - Oral 6 Month	1.00	18.97	1.00	18.97
Wellness Exam with Consultation	1.00	43.00	1.00	43.00
House Lab - Intestinal Parasite Screen 1 Year	1.00	38.48	1.00	38.48
House Lab - Canine Heartworm Test	1.00	40.00	1.00	40.00
OSHA/Biomedical Waste Compliance Level I	1.00	7.64	1.00	7.64
Estim	ate	Low		Expected
		1096.25		1096.25
Sales Tax @ 8.25%		12.54		12.54
With Tax & Discou	ints	1108.79		1108.79

This is only an ESTIMATE. The actual diagnostic or treatment plan may require more diagnostics, medications, or procedures. The range of this estimate may vary by as much as 10-15%. This Estimate is valid for 30 days.

For dental cleanings and procedures - Under anesthesia we often find problems previously undetected. Often broken, cracked, infected, loose, or abscessed teeth are found. These problems are painful and may require treatment and/or extractions.

Should unforeseen, non-emergency procedures not listed above be necessary and desirable in the attending Veterinarian's professional judgment:

I have read and do understand this estimate. I do understand that services rendered are due on the day they are received. I understand and

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I request that the Veterinarians use his/her best judgement to provide the therapy and procedures needed.

I request to be telephoned prior to any additional procedures, other than emergencies. However, if I cannot be reached, I understand the Veterinarian will use his/her best judgement to provide the therapy and procedures needed.

will be my responsibility.	
Please indicate which form of payment is intended to be used for	r today's services:
Cash Visa/ Master Card/ Am Ex/ Discover Che	eck (\$500 limit) Care Credit
Signed:	Date:

agree to pay a finance charge of 1.5% per month on any unpaid balance. Any attorney or collection fees incurred due to delinquency in payment

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