

Puppy Vaccine and Booster Tracker



Puppy Name: _____

Owner: _____

Breed: _____

Veterinarian: _____

Date of Birth: _____

Clinic Phone: _____

1 Initial Puppy Series

Vaccine	Dose 1	Dose 2	Dose 3	Final Puppy Dose	Notes
DA2PP / DAPP / DHPP					
Rabies					
Leptospirosis					
Bordetella					
Other 1					
Other 2					

2 Booster Tracker

Vaccine	Booster Due	Booster Given	Next Due	Notes

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Series Completed

Date: _____