# **Old LEASH pet surrender request form**

# First name

Wayanne

Last name Cassol

Street address 2738 Emerson Ln

City

Kissimmee

**Zip code** 34743

Email wayannebruna@hotmail.com

**Phone** (407) 533-0470

Reason for surrender baby allergy

**My current living situation is...** I have a stable home.

#### Animal 1

Animal 1 name Tispi

Animal 1 species cat

Animal 1 size

Animal 1 gender female

Has the animal 1 been spayed? yes

Animal 1 age 3 - 5 years

**Does animal 1 have any known medical issues?** no

Has animal 1 ever bitten anybody?

Animal 1 photo

## Just a few more questions...

How long have you had the animals? 3 - 5 years

Reason(s) for concern - click all that apply.

• allergies

Other reason not listed new baby has been getting rashes from cat

### Administration

Shelter to client contact date 01/10/2023

Surrender necessary

no

Staff member making appointment(s). Dawn

Multiple appointments? no

**Outcome data** 

Call outcome referred to other resources

Final call date

01/10/2023

Admin notes

Did not like the idea of the chance of euthanasia and decided to keep trying to rehome on her own. DGS

Final surrender outcome

not applicable