

Old LEASH pet surrender request form

First name

Marissa

Last name

Humphries

Street address

126 spoonbill court

City

Kissimmee

Zip code

34758

Email

marissshumphries0201@gmail.com

Phone

(321) 437-8549

Reason for surrender

Recently became homeless and cannot care for pet

My current living situation is...

I would rather not say.

Animal 1

Animal 1 name

Kali

Animal 1 species

dog

Animal 1 dog breed

Pitbull

Animal 1 size

31 - 40 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

yes

Animal 1 age

1 - 2 years

Does animal 1 have any known medical issues?

yes

Has animal 1 ever bitten anybody?

no

Animal 1 explain medical issues

3 legged

Just a few more questions...

How long have you had the animals?

4 months to 1 year

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

- homeless
- no time for care

Administration

Shelter to client contact date

01/11/2023

Surrender necessary

no

Staff member making appointment(s).

alg

Multiple appointments?

no

Outcome data

Call outcome

referred to other resources

Final call date

01/11/2023

Admin notes

POLK CO RESIDENT REFER TO POLK CO ANIMAL CONTROL-ALG

Final surrender outcome

called and cancelled