

Old LEASH pet surrender request form

First name

Wilfredo

Last name

Santos

Street address

2024 Iacie jo lane

City

Kissimmee

Zip code

34743

Email

wilfredosantos1969@gmail.com

Phone

(407) 552-2999

Reason for surrender

I have medical issues

My current living situation is...

I have a stable home.

Animal 1

Animal 1 name

King

Animal 1 species

dog

Animal 1 dog breed

American bully

Animal 1 size

51 + lbs

Animal 1 gender

male

Has animal 1 been neutered?

no

Animal 1 age

1 - 2 years

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



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Just a few more questions...

How long have you had the animals?

1 - 2 years

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

- no time for care

Other reason not listed

My wife and I have medical issues

Administration

Shelter to client contact date

01/11/2023

Staff member making appointment(s).

ALG

Multiple appointments?

no

Outcome data

Call outcome

non responsive to contact/no show

Admin notes

1/11/23 CALLED AND LEFT A VM-ALG
1/13/23- Called and left vm. AM

Final surrender outcome

not applicable