Old LEASH pet surrender request form First name Ana Rosa Last name Laracuente Maldonado Street address 57 Las rises ct

City

Kissimmee

Zip code

34743

Email

alaracuenteal7@gmail.com

Phone

(414) 306-0584

Reason for surrender

I can no longer take care of the dog, working long hours

My current living situation is...

I have a stable home.

Animal 1

Animal 1 name

Lady

Animal 1 species

dog

Animal 1 dog breed

Shih Tzu

Animal 1 size

11 - 20 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

Animal 1 age

3 - 5 years

Does animal 1 have any known medical issues?

Has animal 1 ever bitten anybody?

Animal 1 explain medical issues

1 paralyzed back leg

Animal 1 photo



IMG_2144.jpg

Just a few more questions...

How long have you had the animals?

3 - 5 years

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

• no time for care

Administration

Multiple appointments?

no

Outcome data

Call outcome

non responsive to contact/no show

Admin notes

2/1/23- Called and left VM. AM 210/23-Called and left VM. AM

Final surrender outcome

not applicable