

Old LEASH pet surrender request form

First name

Barbara

Last name

Cosser

Street address

3254 Brown St

City

St cloud

Zip code

34769

Email

Goofy6452@aol.com

Phone

(407) 953-8933

Reason for surrender

I am not able to care for here

My current living situation is...

I would rather not say.

Animal 1

Animal 1 name

Bonnie Mae

Animal 1 species

dog

Animal 1 dog breed

West Highland Terrier

Animal 1 size

11 - 20 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

no

Animal 1 age

5 years +

Does animal 1 have any known medical issues?

yes

Has animal 1 ever bitten anybody?

no

Animal 1 explain medical issues

Seizures

Animal 1 photo



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Just a few more questions...

How long have you had the animals?

5 + years

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

- behavior

Other reason not listed

Living in a friend's home

How we can help you keep your animals?

I am 70 years old with medical problems and living with a friend. I am not able to care for her. She is 13 years old and potties in the house.

Administration

Shelter to client contact date

02/01/2023

Surrender necessary

yes

Staff member making appointment(s).

am

Multiple appointments?

no

Appointment 1

Date of appointment 1

02/03/2023

Time of appointment 1

02:00 pm

Outcome data

Admin notes

2/1/23- Called the owner and the dog is 13 years old and has seizures often. I told her it would be set up as a 300 appointment and the owner was ok with that. AM