Old LEASH pet surrender request form

First name

Thomas

Last name Turner

Street address 4715 Kissimmee Park road MH2

City St. Cloud

SL. CIOUU

Zip code 34772

- - - - -

Email TurnerTurner074@gmail.com

Phone (407) 738-7200

Reason for surrender Health reasons

My current living situation is...

I would rather not say.

Animal 1

Animal 1 name Gus

Animal 1 species

Animal 1 dog breed German shepherd

Animal 1 size

Animal 1 gender male

Has animal 1 been neutered? yes

Animal 1 age

3 - 5 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? 4 months to 1 year

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

allergies

Other reason not listed Can't walk due to back

Administration

Shelter to client contact date 02/03/2023

Surrender necessary

Multiple appointments?

Outcome data

Call outcome referred to other resources

Final call date

02/03/2023

Admin notes

2/3/23 Spoke with owner Thomas Turner and his wife (name not obtained). Mr. Turner stated his wife broke her back as well he has a bad back and struggles to walk. I asked if they had reached out to other rescue organizations and was informed no. I asked that they reach out to other organizations while waiting for appointment date. They were provided a date of March 29th and did not like how far out the appointment was. I then explained to them our polices and made them aware there is a chance of euthanasia. Mr. Turner stated they did not want their dog euthanized and would try other options. C. Wildermuth