

Old LEASH pet surrender request form

First name

hajar

Last name

kisosondi

Street address

2540 John Young Pkwy

City

kissimmee

Zip code

34741

Email

[ineedanemaill@yahoo.com](mailto:ineedanemaill@yahoo.com)

Phone

(407) 535-0620

Reason for surrender

I don't have a stable place to live

My current living situation is...

I have been evicted and do not have a home.

Animal 1

Animal 1 name

Rustie Baby

Animal 1 species

cat

Animal 1 size

21 - 30 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

no

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



20221002\_214035.jpg

Just a few more questions...

How long have you had the animals?

3 - 5 years

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

- cost of food
- cost of vet care
- homeless

How we can help you keep your animals?

Unless you offer housing for people too, I don't think it would be possible for me to keep her at this time. I just want what's best for her.

Administration

Shelter to client contact date

02/14/2023

Surrender necessary

yes

Staff member making appointment(s).

am

Send appointment email

no

Send wait time notice

no

Multiple appointments?

no

Appointment 1

Date of appointment 1

02/28/2023

Time of appointment 1

11:30 am

Outcome data

Admin notes

2/14/23- Called the owner and she stated she is getting evicted tomorrow and ok per Dawn to come in 2 weeks from now because she cannot afford medical and food. I made her aware of our policies and I cannot guarantee the outcome of the animal. AM