

Old LEASH pet surrender request form

First name

Gladys

Last name

Fernandez

Street address

2608 Walden ct

City

Kissimmee

Zip code

34743

Email

[gldfer10@icloud.com](mailto:gldfer10@icloud.com)

Phone

(407) 929-1915

Reason for surrender

Mental health

My current living situation is...

I have a stable home.

Animal 1

Animal 1 name

Bear

Animal 1 species

dog

Animal 1 dog breed

Labradoodle

Animal 1 size

21 - 30 lbs

Animal 1 gender

male

Has animal 1 been neutered?

yes

Animal 1 age

3 - 5 years

Does animal 1 have any known medical issues?

yes

Has animal 1 ever bitten anybody?

no

Animal 1 explain medical issues

Colin inflammation irritable bowel diseases

Just a few more questions...

How long have you had the animals?

3 - 5 years

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

- behavior
- cost of vet care

Other reason not listed

My mental health

How we can help you keep your animals?

I physically and mentally cannot care for the dog anymore unfortunately.

Administration

Shelter to client contact date

02/16/2023

Multiple appointments?

no

Outcome data

Admin notes

2/16/23- Called the owner and she stated the dog is have a lot of medical issues, but the vets don't know what is going on. The owner stated she is taking the dog to the vet tomorrow and I said for to give us a call back tomorrow with the information the vet gives her. AM