Old LEASH pet surrender request form
First name
Krystal
Last name
Gammon
Street address 1515 alabama ave
City

saint cloud

### Zip code

34769

#### Email

klgammon99@icloud.com

#### Phone

(407) 785-7166

### Reason for surrender

Can not trust around children

### My current living situation is...

I have a stable home.

### **Animal 1**

### Animal 1 name

Asher

### Animal 1 species

dog

### Animal 1 dog breed

Pit mix

### Animal 1 size

41 - 50 lbs

### Animal 1 gender

male

### Has animal 1 been neutered?

### Animal 1 age

5 years +

# Does animal 1 have any known medical issues?

# Has animal 1 ever bitten anybody?

yes

# Animal 1 photo



852B90C2-5C91-44AA-970D-FC3E32432AB8.jpeg

# 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

The past few years he has shown he can not be trusted around children and has become aggressive towards other animals.

# Administration

# Shelter to client contact date

03/15/2023

### **Surrender necessary**

nc

## Staff member making appointment(s).

DM

### Multiple appointments?

no

### **Outcome data**

### Admin notes

I CALLED AND SPOKE TO THE OWNER THE DOG IS GROWLING AND SHOWING TEETH TO HER AND HER CHILDREN UNPROVOKED SHE IS GOING TO BRING HIM IN FOR A 300 APPOINTMENT DM