

Old LEASH pet surrender request form

First name

Alexandra

Last name

Claffey

Street address

1148 Cambourne Dr

City

Kissimmee

Zip code

34758

Email

allien92@gmail.com

Reason for surrender

Stray

My current living situation is...

I have a stable home.

I have read and understood the pet rehome statement.

yes

About the animal(s)

Number of animals to be discussed?

2

Animal 1

Animal 1 name

Unknown

Animal 1 species

dog

Animal 1 dog breed

Unknown

Animal 1 size

21 - 30 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

yes

Animal 1 age

1 - 2 years

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 2

Animal 2 name

Unknown

Animal 2 species

dog

Animal 2 dog breed

Unknown

Animal 2 size

11 - 20 lbs

Animal 2 gender

female

Has animal 2 been spayed?

no

Animal 2 age

2 - 3 months

Animal 2 personality

- good with dogs/cats
- good with small children

Animal 2 personality

good with dogs/cats

Has animal 2 ever bitten anybody?

no

Does animal 2 have any medical issues?

no

Just a few more questions...

How long have you had the animals?

2 - 3 months

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

- has too many pets

Other reason not listed

Strays

How we can help you keep your animals?

Cannot keep strays as we have other animals in the home.

Administration

Shelter to client contact date

06/02/2023

Surrender necessary

no

Staff member making appointment(s).

Dm

Multiple appointments?

no

Outcome data

Call outcome

resolved by client

Final call date

06/02/2023

Admin notes

6/2/23 duplicate DM

Final surrender outcome

not applicable

Close ticket

yes