

Old LEASH pet surrender request form

First name

Carla

Last name

Rivera

Street address

1707 Boat Launch Rd

City

Kissimmee

Zip code

34746

Email

trikinorev@gmail.com

Phone

(407) 793-0490

Reason for surrender

Senior needs more vet care we cannot afford

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?

1

Animal 1

Animal 1 name

Van Gogh

Animal 1 species

dog

Animal 1 dog breed

Boston Terrier

Animal 1 size

11 - 20 lbs

Animal 1 gender

male

Has animal 1 been neutered?

no

Animal 1 age

5 years +

Does animal 1 have any known medical issues?

yes

Has animal 1 ever bitten anybody?

yes

Animal 1 explain medical issues

Digestion and inflammation

Just a few more questions...

How long have you had the animals?

5 + years

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

- behavior
- cost of vet care
- no longer want animal

Other reason not listed

Constantly getting sick in the stomach and soft stool with blood.

How we can help you keep your animals?

We have taken him to the vet multiple times but only provide costly medications. Then he gets sick again. We think it might be he is eating grass, mud and his own feces.

Administration

Shelter to client contact date

06/16/2023

Surrender necessary

no

Staff member making appointment(s).

DM

Multiple appointments?

no

Outcome data

Call outcome

resolved by client

Final call date

06/16/2023

Admin notes

6/14/23- Called and left VM. AM
6/16/23 called and left VM DM

Final surrender outcome

not applicable

Close ticket

yes