

Old LEASH pet surrender request form

First name

Christy

Last name

Johndro

Street address

2124 Peach Tree Blvd

City

Saint Cloud

Zip code

34769

Email

christynoe12124@gmail.com

Phone

(407) 795-9494

Reason for surrender

Can't afford to take care of the dog

My current living situation is...

I would rather not say.

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

Minnie

Animal 1 species

dog

Animal 1 dog breed

N/A

Animal 1 size

21 - 30 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

yes

Animal 1 age

9 - 12 months

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Just a few more questions...

How long have you had the animals?

2 - 3 months

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

- cost of food
- cost of vet care

Administration

Shelter to client contact date

06/30/2023

Surrender necessary

no

Staff member making appointment(s).

dm

Multiple appointments?

no

Outcome data

Call outcome

resolved by client

Final call date

07/05/2023

Admin notes

6/30/23 Called left message. C. Wildermuth
7/5/23 called and spoke to the owner and she said she has figured everything out and no longer needs our services DM

Final surrender outcome

not applicable

Close ticket

yes