

Old LEASH pet surrender request form

First name

Shamah

Last name

Howell

Street address

3067 Eagle Crossing Dr

City

Kissimmee

Zip code

34746

Email

shamahkj@yahoo.com

Phone

(267) 371-3550

Reason for surrender

Financial hardship

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?

2

Animal 1

Animal 1 name

Bella

Animal 1 species

dog

Animal 1 dog breed

American Bully

Animal 1 size

41 - 50 lbs

Animal 1 gender

female

Has the animal 1 been spayed?

no

Animal 1 age

3 - 5 years

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 2

Animal 2 name

Piglet

Animal 2 species

dog

Animal 2 dog breed

American Bully

Animal 2 size

41 - 50 lbs

Animal 2 gender

female

Has animal 2 been spayed?

no

Animal 2 age

3 - 5 years

Animal 2 personality

- good with dogs
- good with small animals
- good with small children

Animal 2 personality

good with small children

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?

3 - 5 years

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

- cost of food
- cost of vet care

Other reason not listed

Financial Hardship

How we can help you keep your animals?

N/A

Administration

Shelter to client contact date

07/12/2023

Surrender necessary

no

Staff member making appointment(s).

DM

Multiple appointments?

no

Outcome data

Call outcome

resolved by client

Final call date

07/12/2023

Admin notes

7/12/23 I called and spoke to the owner, and she rehomed them to a new family, so she is no longer needing our services DM

Final surrender outcome

not applicable

Close ticket

yes