

Old LEASH pet surrender request form

First name

Shari

Last name

Medina

Street address

1952 fairway loop

City

Kissimmee

Zip code

34746

Email

sharimedina@gmail.com

Phone

(407) 738-8606

Reason for surrender

Schedule

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

Gator

Animal 1 species

dog

Animal 1 dog breed

Beagle

Animal 1 size

31 - 40 lbs

Animal 1 color

Brown/white

Animal 1 gender

male

Has animal 1 been neutered?

yes

Animal 1 age

5 years +

Does animal 1 have any known medical issues?

no

Has animal 1 ever bitten anybody?

no

Animal 1 photo



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Just a few more questions...

How long have you had the animals?

3 - 5 years

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

- no time for care

Administration

Shelter to client contact date

10/12/2023

Follow - up required

yes

Follow up notes/actions needed 1

Left VM to call back ... looking to schedule for 1/25

Agent initials follow up 1

hardy

Surrender necessary

no

Staff member making appointment(s).

Hardy

Multiple appointments?

no

Outcome data

Call outcome

non responsive to contact/no show

Final call date

01/11/2024

Admin notes

No contact was every made. Closed request.

Final surrender outcome

not applicable

Close ticket

yes