Old LEASH pet surrender request form

First name

Anique

Last name

Ellis

Street address

1821 castleton drive

City saint cloud

Zip code

34771

Email ellisanique313@gmail.com

Phone (407) 807-3285

Reason for surrender young adult soon to be college student who cannot provide the adequate care I used to

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 Miracle

Animal 1 species

cat

Animal 1 size

Animal 1 color tortoise shell

Animal 1 gender female

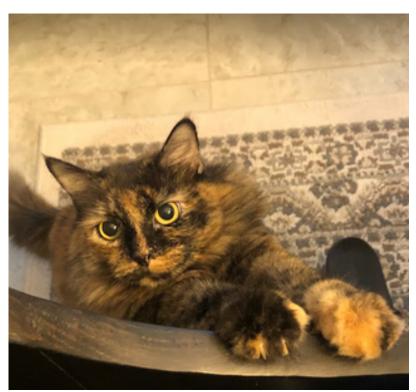
Has the animal 1 been spayed? yes

Animal 1 age 5 years +

Does animal 1 have any known medical issues? no

Has animal 1 ever bitten anybody?

Animal 1 photo



miracles headshot.png

Just a few more questions...

How long have you had the animals?

5 + years

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

• no time for care

Other reason not listed she deserves a home that can provide adequate attention

How we can help you keep your animals?

I don't think there is a way for that to happen

Administration

Shelter to client contact date 10/25/2023

Follow - up required yes

Follow up notes/actions needed 1 left VM to call back

Agent initials follow up 1 Hardy

Multiple appointments? no

Outcome data

Call outcome non responsive to contact/no show

Final call date 01/11/2024

Final surrender outcome not applicable

Close ticket yes