

Old LEASH pet surrender request form

First name

barbara

Last name

jeffery

Street address

homeless

City

kissimmee

Zip code

34741

Email

[petretention@osceola.org](mailto:petretention@osceola.org)

Phone

(407) 288-6105

Reason for surrender

Homeless

My current living situation is...

I have been evicted and do not have a 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

Lily

Animal 1 species

cat

Animal 1 color

calico

Animal 1 gender

female

Has the animal 1 been spayed?

yes

Animal 1 age

1 - 2 years

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?

1 - 2 years

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

- homeless

**Other reason not listed**

Living in storage unit

**How we can help you keep your animals?**

no way

**Administration**

**Shelter to client contact date**

01/12/2024

**Follow - up required**

no

**Surrender necessary**

no

**Multiple appointments?**

no

**Outcome data**

**Call outcome**

resolved by client

**Final call date**

01/12/2024

**Final surrender outcome**

resolved by client

**Close ticket**

yes