

Old LEASH pet surrender request form

First name

Jameshia

Last name

Gant

Street address

2109 Cassia Cir Apt D

City

Kissimmee

Zip code

34741

Email

[meshiagant@yahoo.com](mailto:meshiagant@yahoo.com)

Phone

(321) 318-2357

Reason for surrender

Child is allergic to cats

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

Kiki

Animal 1 species

cat

Animal 1 size

11 - 20 lbs

Animal 1 color

Grey/white

Animal 1 gender

female

Has the animal 1 been spayed?

no

Animal 1 age

1 - 2 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?

1 - 2 years

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

- allergies

How we can help you keep your animals?

you can't as our daughter is very allergic to cat and we recently found out.

Administration

Shelter to client contact date

01/18/2024

Follow - up required

no

Surrender necessary

yes

Staff member making appointment(s).

Hardy

Send appointment email

yes

Send wait time notice

yes

Multiple appointments?

no

Appointment 1

**Date of appointment 1**

03/25/2024

**Time of appointment 1**

04:00 pm

**Outcome data**

**Call outcome**

appointment made

**Final call date**

01/18/2024

**Close ticket**

no