

Old LEASH pet surrender request form

First name

Jackie

Last name

Miranda

Street address

564 Floral Drive

City

Kissimmee

Zip code

34743

Email

jackjsanchez@gmail.com

Phone

(954) 601-6281

Reason for surrender

Dog needs attention/can't walk and need amputation - can't afford to care for her

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

Harper

Animal 1 species

dog

Animal 1 dog breed

brown nose coon

Animal 1 size

51 + lbs

Animal 1 color

white with black and brown spots

Animal 1 gender

female

Has the animal 1 been spayed?

yes

Animal 1 age

5 years +

Does animal 1 have any known medical issues?

yes

Has animal 1 ever bitten anybody?

no

Animal 1 explain medical issues

dog has a big ball on her tail that bleeds and smells, she also has a lump on her neck and she has sciatic hip issues - unable to walk

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 vet care
- insurance
- no time for care

Administration

Shelter to client contact date

02/13/2024

Follow - up required

no

Surrender necessary

yes

Staff member making appointment(s).

C.WILDERMUTH

Send appointment email

yes

Send wait time notice

yes

Multiple appointments?

no

Appointment 1

Date of appointment 1

02/16/2024

Time of appointment 1

04:00 pm

Outcome data

Call outcome

euthanasia deemed necessary

Final call date

02/13/2024

Admin notes

2/13/24 CALLED OWNER WHO INFORMED ME DOG IS UNABLE TO WALK, HAS A MASS ON TAIL THAT WILL BLEED AND SMELLS REALLY BAD. ADVISED DOG IS ROUGHLY OVER 9 YRS OLD. I EXPLAINED WITH THE INFORMATION THAT WAS PROVIDED, EUTHANASIA IS NECESSARY.

Close ticket

no