

Old LEASH pet surrender request form

First name

Catherine

Last name

Kessler

Street address

3128 Carpenter Ln

City

St Cloud

Zip code

34769

Email

cathykessler29@gmail.com

Phone

(407) 218-2449

Reason for surrender

He is a puppy and keeps making my 77 year old man fall

My current living situation is...

I would rather not say.

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

Ice

Animal 1 species

dog

Animal 1 dog breed

Staffordshire

Animal 1 size

21 - 30 lbs

Animal 1 color

White

Animal 1 gender

male

Has animal 1 been neutered?

no

Animal 1 age

4 - 8 months

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?

4 months to 1 year

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

- behavior
- conflict with others

Administration

Shelter to client contact date

03/20/2024

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

04/29/2024

Time of appointment 1

12:00 pm

Outcome data

Call outcome

appointment made

Final call date

03/20/2024

Close ticket

no