

Old LEASH pet surrender request form

First name

Gloria

Last name

Rodriguez

Street address

2175 Pinemont St, 102

City

Kissimmee

Zip code

34746

Email

glorianabigail79@gmail.com

Phone

(407) 212-2837

Reason for surrender

My health has took a worse for the turn. I have chronic rheumatoid arthritis and I am unable to care for him

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

ace

Animal 1 species

dog

Animal 1 dog breed

Pitbull

Animal 1 size

51 + lbs

Animal 1 color

White and brown

Animal 1 gender

male

Has animal 1 been neutered?

yes

Animal 1 age

3 - 5 years

Does animal 1 have any known medical issues?

yes

Has animal 1 ever bitten anybody?

no

Animal 1 explain medical issues

He has been throwing up for 2 days and I don't know what's wrong with him

Just a few more questions...

How long have you had the animals?

2 - 3 months

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

- no longer want animal

Other reason not listed

Cannot properly care for him because of my health issues I adopted him in February from the shelter

How we can help you keep your animals?

No, I can't keep him

Administration

Shelter to client contact date

04/16/2024

Follow - up required

no

Follow up notes/actions needed 1

appt made

Agent initials follow up 1

LA

Surrender necessary

yes

Staff member making appointment(s).

yes

Send appointment email

no

Send wait time notice

no

Multiple appointments?

no

Appointment 1

Date of appointment 1

07/01/2024

Time of appointment 1

10:00 am

Outcome data

Call outcome

appointment made

Final call date

04/16/2024

Admin notes

04-16-24 owner has a surgery she need a sooner appt

Final surrender outcome

not applicable

Close ticket

yes