### Old LEASH pet surrender request form

## First name

Melissa

**Last name** Mirlas

Street address 2013 Grande Court Apt 718

**City** Kissimmee

**Zip code** 34743

Email

Mmirlas65@gmail.com

Phone

(407) 989-1023

Reason for surrender

I can't keep her

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?

#### Animal 1

Animal 1 name Minnie

Animal 1 species

Animal 1 dog breed Chiwawwa mix

Animal 1 size 11 - 20 lbs

Animal 1 color Black

Animal 1 gender female

Has the animal 1 been spayed? no

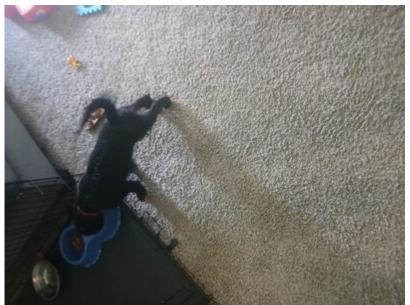
Animal 1 age 4 - 8 months

Does animal 1 have any known medical issues?

Has animal 1 ever bitten anybody?

no

#### Animal 1 photo



20240520\_152156.jpg

#### 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
- no time for care

#### Administration

# Shelter to client contact date 05/29/2024

Follow - up required

#### Surrender necessary

no

Staff member making appointment(s). TF

## Multiple appointments?

no

#### Outcome data

Call outcome resolved by client

Final call date 05/29/2024

Admin notes OWNER REHOMED DOG

Final surrender outcome resolved by client

Close ticket

yes