

Euthanasia Checklist

Euthanasia Date 7-17-25 ID # 41154 Custody verified (Initials) [redacted]

Sedative: Acepromazine (Initials) [redacted]

Oral (strength mg) # of tablets

Inj. 10mg/ml 25 ml Route: IM

Sodium Pen (Fatal Plus) Initials [redacted]

2 ml Route: IV / IP

Determination of Death

5 minutes post injection

Lack of heartbeat-stethoscope (Initials) [redacted]

Lack of heartbeat-palpitation (Initials) [redacted]

Lack of respiration-stethoscope (Initials) [redacted]

Lack of respiration-palpitation (Initials) [redacted]

Lack of respiration-visual (Initials) [redacted]

Lack of corneal reflex (Initials) [redacted]

Lack of toe-pinch reflex (Initials) [redacted]

Lack of capillary refill (Initials) [redacted]

30 minutes post injection

Lack of heartbeat-stethoscope (Initials) [redacted]

Lack of heartbeat-palpitation (Initials) [redacted]

Lack of respiration-stethoscope (Initials) [redacted]

Lack of respiration-palpitation (Initials) [redacted]

Lack of respiration-visual (Initials) [redacted]

Lack of corneal reflex (Initials) [redacted]

Lack of toe-pinch reflex (Initials) [redacted]

Lack of capillary refill (Initials) [redacted]

City of Danville
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID: 41154 CUSTODY DATE: 7-8-25 TIME: 1:30 PM

REASON FOR CUSTODY (mark appropriate box)

LOCATION WHERE CUSTODY WAS TAKEN

Stray / At Large Owner Surrender Seized Bite Case Quarantine

Transfer from Another Releasing Agency Virginia Other:

Name: Out-of-State

DAHS

OWNER'S NAME & ADDRESS (if known)

ADDITIONAL INFORMATION



To many too breed

ANIMAL DESCRIPTION

SPECIES: Feline Canine BREED: DSH COLOR / MARKINGS: Gry Tab SEX: Male Female Altered: Y N Unk
Approximate AGE: YR MO
Approximate WEIGHT: LB
OTHER:

ANIMAL IDENTIFICATION (Check for all types on animal and complete all boxes. If not found, write NO)

License Tag (Number - Details): None Rabies Tag (Number - Details): None Tattoo (Describe): None Collar (Describe - Color, Type, etc.): None Microchip or Other Identification (Describe - Details): Scan: 7-8-25 Scan: 7-17-25 None Pet

CUSTODY RECORD PREPARED BY

Signature: [Redacted] DATE: (MM/DD/YY)

7-8-25

RIGHTFUL OWNER SURRENDER STATEMENT

I am the rightful owner of this animal. I surrender all property rights in this animal. No other person has a right of property in this animal. I understand that this animal may be immediately euthanized or otherwise disposed in accordance with Virginia Code, Title 3.2, Ch. 65. If I want the animal back, I will follow adoption procedures.

SIGNATURE: [Redacted]

DISPOSITION OF ANIMAL: Euthr HOLDING PERIOD EXPIRES ON (Date): 7-9-25

DATE: (MM/DD/YY) 7-17-25 FINAL MICROCHIP SCAN PERFORMED BY (Initial): [Redacted]

Returned to Owner	Adopted	Euthanized	Died in Custody	Transferred to Another Virginia Releasing Agency (name of agency)	Transferred to Out-of-State Releasing Agency (name of agency)	Other
		7-17-25				

Did you contact another shelter? Yes PetCentra

Why did they decline to accept? they don't take street cats