

Euthanasia Checklist

Euthanasia Date 7-8-25 ID # 41066

Custody verified (Initials) [Redacted]

Sedative: Acepromazine (Initials) [Redacted]  
Oral (strength      mg) # of tablets       
Inj. 10mg/ml 10 ml Route: IM

# 2 g

Sodium Pen (Fatal Plus) Initials [Redacted] 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: 41066 CUSTODY DATE: 7-1-25 TIME: 3:55 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

DAAS

**OWNER'S NAME & ADDRESS (if known)**

**ADDITIONAL INFORMATION**

unknown

hanging around 3 days  
Ringsold Mt. Hill Rd

**ANIMAL DESCRIPTION**

SPECIES:  Canine BREED: Blage X COLOR / MARKINGS: Tri SEX:  Male  Female Altered: Y N Unk  
Approximate AGE: 8 wks  YR  MO  
Approximate WEIGHT: 2  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: 7-1-25 Scan: 7-3-25 7-1-25-NO chip

**CUSTODY RECORD PREPARED BY**

Signature: [Redacted] DATE: (MM/DD/YY) 7-1-25

**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**

HOLDING PERIOD EXPIRES ON (Date): 7-7-25

DATE: (MM/DD/YY) 7-8-25 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
		7-8-25				

Did you contact another shelter?

Why did they decline to accept?