

ANIMAL ID 41431	CUSTODY DATE MM/DD/YY 8-4-25	TIME 7:28	AM PM
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REASON FOR CUSTODY (mark appropriate box)				LOCATION WHERE CUSTODY WAS TAKEN
<input checked="" type="checkbox"/> Stray / At Large	<input type="checkbox"/> Owner Surrender	<input type="checkbox"/> Seized	<input type="checkbox"/> Bite Case Quarantine	[REDACTED]
<input type="checkbox"/> Transfer from Another Releasing Agency Name:		<input type="checkbox"/> Virginia <input type="checkbox"/> Out-of-State	<input type="checkbox"/> Other:	

OWNER'S NAME & ADDRESS (if known)  Un known	ADDITIONAL INFORMATION  [REDACTED]
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ANIMAL DESCRIPTION			
SPECIES <input checked="" type="checkbox"/> Feline <input type="checkbox"/> Canine <input type="checkbox"/>	BREED DSH	COLOR / MARKINGS BIK	SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female Altered: Y N Unk Approximate AGE: 4-5 wks <input type="checkbox"/> YR <input type="checkbox"/> MO Approximate WEIGHT: 1 <input checked="" type="checkbox"/> 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: 8-4-25 Scan 81025 None Det

CUSTODY RECORD PREPARED BY	
Signature: [REDACTED]	DATE: (MMDDYY) 8-4-25

**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:

DISPOSITION OF ANIMAL: Euth	HOLDING PERIOD EXPIRES ON (Date): 8-11-25
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DATE: (MMDDYY) 8-19-25	FINAL MICROCHIP SCAN PERFORMED BY (Initials): [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
		8-17-25				

Did you contact another shelter? *Yes* Why did they decline to accept? *NO*  
*Ret Center*