

**City of Danville**  
**Animal Control Officer / Public Animal Shelter**

**ANIMAL CUSTODY RECORD**

**ANIMAL ID** 41467      **CUSTODY DATE** MM/DD/YY 8-7-25      **TIME** 10<sup>50</sup> (AM) 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

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

[REDACTED]

**ANIMAL DESCRIPTION**

<b>SPECIES</b>	<b>BREED</b>	<b>COLOR / MARKINGS</b>	<b>SEX:</b> <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female    Altered: Y N Unk
<input checked="" type="checkbox"/> Feline	DSH	gray tabby	Approximate AGE: / <input checked="" type="checkbox"/> YR <input type="checkbox"/> MO
<input type="checkbox"/> Canine			Approximate WEIGHT: 6 <input checked="" type="checkbox"/> LB
<input type="checkbox"/>			OTHER: Luna

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

<b>License Tag (Number - Details)</b>	<b>Rabies Tag (Number - Details)</b>	<b>Tattoo (Describe)</b>	<b>Collar (Describe - Color, Type, etc.)</b>	<b>Microchip or Other Identification (Describe - Details)</b>
None	None	None	None	Scan: 8-7-25 Scan: 8-8-25 None Det

**CUSTODY RECORD PREPARED BY** [REDACTED]      **DATE: (MM/DD/YY)** 8-7-25

**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, I will follow the procedures.

**SIGNATURE** [REDACTED]

**DISPOSITION OF ANIMAL**      **HOLDING PERIOD** [REDACTED]

**DATE: (MM/DD/YY)** 8-12-25      **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
		8.12.25				

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