BROUGHT IN STRAY
AFFIDAVIT FOR RELEASE

I hereby surrender the following dog(s) to the Guernsey County Dog Shelter

1) _____

Breed Sex Age Color

2) _____

Breed Sex Age Color

3) _____

Breed Sex Age Color

Address where animal(s) were found:

_____

Street City State Zip Code

Date animal found: _____

I hereby swear or affirm that the above mentioned animal(s) DOES NOT belong to me or any member of my household. I also swear or affirm that I have NO INFORMATION regarding the ownership of said animal(s) and all information provided on this form is true and correct to my knowledge.

Signed: _____ Date: _____

Name: _____
PLEASE PRINT

Address: _____
Street City State Zip Code

Phone #: _____ County of Residence: _____

Employee Signature: _____

Microchip check done YES_____ NO _____