

I, Mr/Mrs/Miss/Ms.....

Veterinary Practice.....

Address.....Postcode.....

Tel:.....

1. Hand over to Anim-Mates: **Cat / Dog / Rabbit / Guinea Pig / or**

2. Description **Male / Female** Colour/Breed:.....Estimated age.....

3. What veterinary treatment has the animal received:.....

4. For cats: FIV / FeLV tested: **Yes / No** Result:..... Other tests:.....

If handed in unknown or dumped with you:

5. Details of where found:.....

6. How long has s/he been with you: **days**..... **weeks** **months**

7. Have you informed Battersea Lost & Found: **Yes / No** or other lost & found agencies: **Yes / No**

If Yes, who:.....

8. Have you contacted other groups for help: **Yes / No** If Yes, who:.....

9. What enquiries have you made to find out if the animal lives locally:.....

If handed in by previous owner:

10. Did the owner legally sign over to you: **Yes / No**

11. For what reason:.....

Signed: Dated:

Completed by:..... (Anim-Mates volunteer)

Paperwork confirming veterinary treatment received: **Yes/No** if yes, what:.....

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|----------|--|--|--|-------------------|--|--|
| Entered: | | | | Battersea Ref No. | | |
|----------|--|--|--|-------------------|--|--|