

Public Health Command Europe

Unit 33105

APO, AE 09180

SUBJECT: Transfer of registered pet to a new owner.

1. I, _____, am giving my dog/cat up for adoption.
(First and Last name)

My dog/cat is registered at the Spangdahlem Veterinary treatment Facility. The adoption is effective as of _____.

(Date of adoption)

Pet's Name: _____

Breed: _____ Sex: _____

Rabies Tag Number: _____

Microchip Number: _____

Date: _____

Signature: _____

2. I, _____, am adopting the animal listed above and I fully understand the responsibility and financial liability inherent in owning a pet. I further understand that the pet is required to be currently vaccinated against rabies and responsible for all cost incurred.

Print name and rank of new Owner: _____

Unit: _____ Duty phone number: _____

Home phone number: _____

Cell phone number: _____

Email Address: _____

Date: _____

Signature: _____

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Our dog/cat is registered at the Spangdahlem Veterinary treatment Facility. The adoption is effective as of _____. (Date of adoption)

Pet's Name: _____

Breed: _____ Sex: _____

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Date: _____ Signature: _____

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2. I, _____, am adopting the animal listed above and I fully understand the responsibility and financial liability inherent in owning a pet. I further understand that the pet is required to be currently vaccinated against rabies and responsible for all cost incurred.

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