

Lost Animal Report

Today's Date: _____ Date Lost: _____

Dog: Cat: Male: Female: Spay/Neuter:

Name: _____

Breed: _____

Colors: _____

Hair Length: (circle one)

Short Medium Long Wire Wavy Curly Smooth

Age: _____ (circle one)

Baby Young Adult Adult Senior Unknown

Size: _____ (circle one)

Small (0-24lbs) Medium (25-50lbs) Large (over 50lbs)

Circle all that apply:

Wearing a collar or harness Wearing ID tags Microchipped
Color _____ Number _____

Special Features/Additional Information:

City last seen: _____ Cross streets: _____ and _____

Contact information:

1) _____ Number: _____

2) _____ Number: _____

Email Pictures or Fliers to: AnimalCareClinic@SolanoCounty.com