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No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 throught. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours be one allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the

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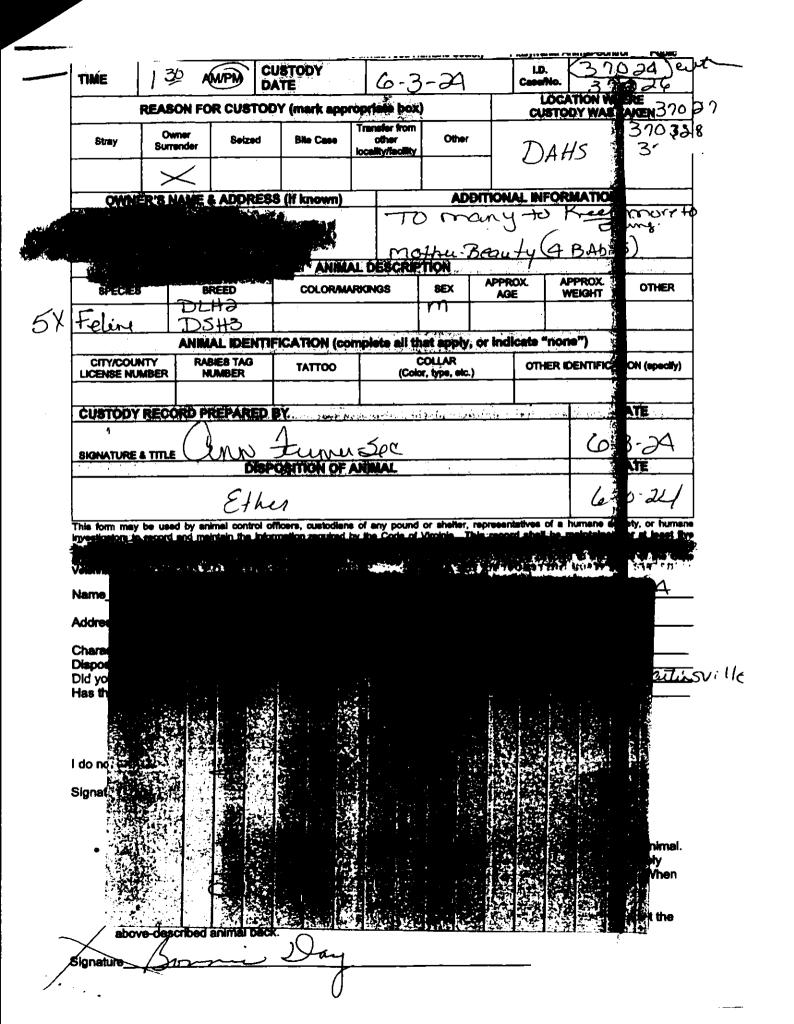
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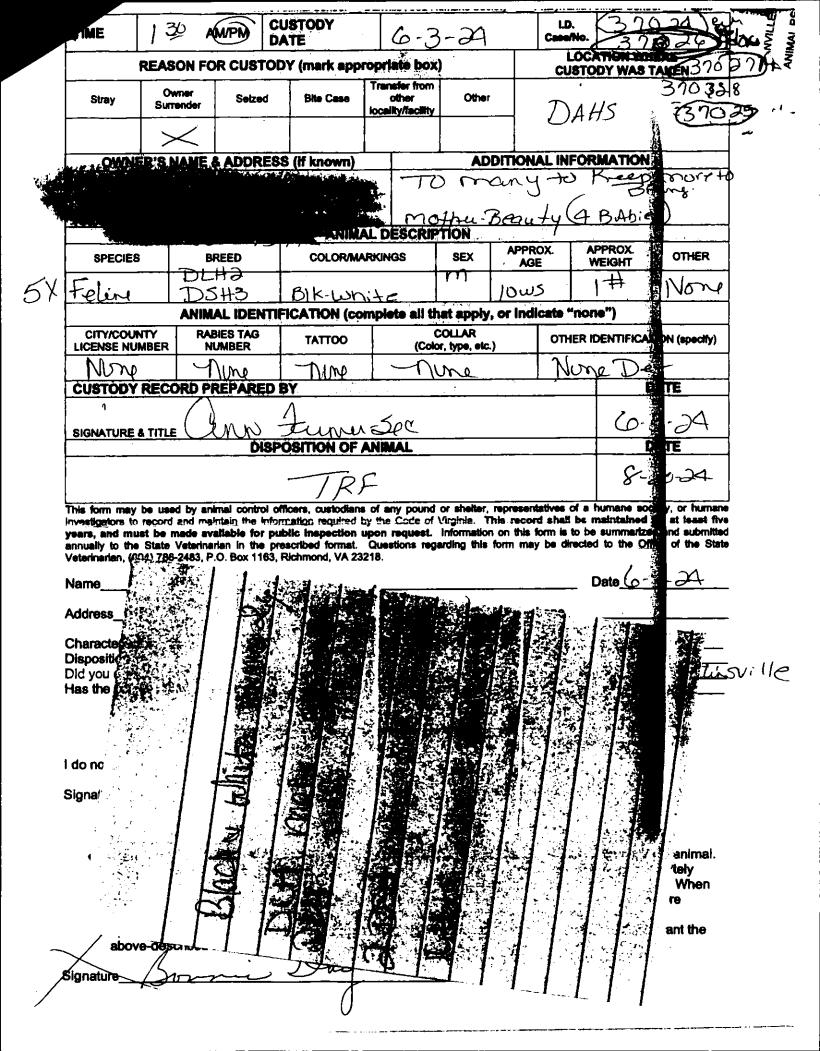
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I am the rightful owner of the above-described animal, and I surrender all property rightfun such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 thipugh 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the above described animal back.

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No other person has a right of property in the animal, and I surrender all property rights in such animal No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the

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acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the

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Danville Police Department IAL CUSTODY RECO **Animal Control Unit** HOSE AND THE PROPERTY OF THE COME OF VIEW (434) 548-3017 CASE NO. **CUSTODY DATE** 37072 REASON FOR CUSTODY (mark appropriate box) CUSTODY WAS THEN Transfer from Stray Seized **Bite Case** other Other · Surrender locality/facility OWNER'S NAME & ADDRESS (If known) ADDITIONAL INFORMATION MNKNOWN Telephone: ANIMAL DESCRIPTION SPECIES APPROX. APPROX. BREED COLORMARKINGS SEX OTHER AGE WEIGHT Jall ANIMAL IDENTIFICATION (complete all that apply, or indicate "none") CITY/COUNTY **RABIES TAG** COLLAR **TATOO** OTHER IDENTIFICATION (specify) LICENSE NUMBER NUMBER (Color, type, etc.) SIGNATU DATE 6-5-24

This form may be used by enimal control difficers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.B of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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CUSTODY R	ECORD PI	REPARED	BY					, - 1d	D	
SIGNATURE & T	TILE	A	P	>	391				610	24
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This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.106.B of the Code of Virginia. This record shall be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

	DEADON -		DATE	<u> </u>	,	24	I.D. Case/No.	137	708 084
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	REASON FO	OR CUSTO	DY (mark appro	cod etainq)		C	LOCAT	ION W	HERE TAKEN
Stray	Owner Surrender	Seized	Bite Case	Fransfer from other ocality/facility	Other			<u></u> ЭД	HS	IAREN
OVA	DIGNAME	AADDRES	S (if known)		AD	DITION	IAL IN	IFORM		<u> </u>
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C		-	ANIMAL	DESCRIP	TION			-	-	
SPECIES	BI	REED	COLORMARI	GNGS	SEX	APPR AG		APP		OTHER
Canina		ind	TRI		F	7		50	#	None
CITY/COUNT	ANIM	AL IDENTIF	ICATION (com			or Ind	cate	"none")	
CENSE NUM	BER N	UMBER	TATTOO		OLLAR r, type, etc.))			- 1	FION (specify)
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allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the above-described animal back.

Signature____

Danville Police Department Animal Control Unit (434) 548-3017



CASE NO.	37089		CUSTODY DATE	617	124		TIME	9:00	AM) PM
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Stray	Owner Surrender	Seized	Bite Case	Transfer from other locality/facility	Other				
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i diapitoria.	* *		ANIMAL	. DESCRIP	TION		F : .	Barra Ag	
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K9	PU	ple	red		M	ly	V	isibs	NONE
	ANI	IAL IDENT	FICATION (com	plets all th	at spirty	, or Indi	cate "no	(i) (i)	
CITY/COUN	TY R/	NUMBER	TATOO		COLLAR or, type, etc			IDENTIFICATI	(specify)
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This form may be used by enimal control officers, custodiens of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.8 of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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Stray	Surrender	Seized	Bite Case	other	Othe	r	_		
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Va	The		Tan			AGE		WEIGHT	OTHER
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CITY/COUN ICENSE NUM		MES TAG	TATTOO		COLLAR r, type, etc.	$\overline{}$	OTHER	DENTIFICA	TION (specify)
Den	र नि	Vm.	TIME -		Blac		1 /s		
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Danville Police Department Animal Control Unit (434) 548-3017



CASE NO. 3	262						i	
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				Sarek	a	11/14 - 13/14/14/14 	Carles I Co	
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K9	Chihuahu	7 超月 丁	ri	F	10	rs -	3165	NONE
	ANIMAL IDEN	ITIFICATION (col	mplete all t	hat apply	, or indic	ate inc	HOPE)	
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This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.B of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed formet. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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VDACS 03145 (Revised 7/06)

\cdot	Danville Police Department Animal Control Unit (434) 548-3017	Th	ANIA to form the	MAL GUST lides of provided 1-796, 105, B of B	ODY REC	ORD
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This form may be used by enimal control officers, custodiens of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.8 of the Code of Virginia. This record shell be maintained for at least five years, and must be made evaliable for public inspection upon request. Information on this form is to be summerized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

Danville Police Department Animal Control Unit (434) 548-3017

ANIMAL GUSTODY REGORD

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This form may be used by animal control officers, custodians of any pound dishelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.B of the Code of Virginia. This record shall be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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Animal Control Unit (434) 548-3017 37110 CASE NO. **CUSTODY DATE** REABON FOR GUSTODY (mark appropriate box) Owner Strav Seized Bite Case other Othe Surrender locality/facility OWNER'S NAME & ADDRESS (If known) ADDITIONAL INFORMATION very sick. magots of verthm, skinny eyes are closed by infection Telephone: ANMAL DESCRIPTION **SPECIES** APPROX. BREED COLOR/MARKINGS OTHER AGE WEIGHT re line DSIT (AN ANIMAL IDENTIFICATION (complete all that apply, or indicate (notes) CITY/COUNTY RABIES TAG TATOO OTHER IDENTIFICAT LICENSE NUMBER (Color, type, etc.) NINE NUML Name NO NO CUSTODY RECORD PREPARED BY 17 3 H SIGNATURE & TITLE DISPOSITION OF ANIMAL

Danville Police Department

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Signatur

Danville Police Department Animal Control Unit (434) 548-3017 6-10-24 37122 CASE NO. **CUSTODY DATE** READON FOR CUSTODY (mark epiterbridge box) Owner Stray Seized Bite Case Astoria Other Surrender locality/facilit Placy force OWNER'S NAME & ADDRESS (K thown) ADDITIONAL DIFORMATION Telephone: ANIMAL DESCRIPTION APPROX. **SPECIES** BREED COLORMARKINGS OTHER AGE WEIGHT feline DMH torthestar ANNIAL IDENTIFICATION (complete all that apply, or hydrony more) CITY/COUNTY **RABIES TAG** COLLAR TATOO OTHER IDENTIFICATION LICENSE NUMBER NUMBER (Color, type, etc.) na Mar. CUSTODY RECORD PREPARED BY TO THE RESERVE OF THE PROPERTY OF T ACO IID. Black PP# 372 DISPOSITION OF ANNIAL Ether

This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane ecclety, or humane investigators to record and maintain the information required by \$3.1-796.106.8 of the Code of Virginia. This record shell be imaintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1183, Richmond, Virginia 23218.

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Danville Police Department Animal Control Unit (434) 548-3017

ANIMAL GUSTODY FEGORD

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I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the

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Danville Police Department Animal Control Unit (434) 548-3017

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This form may be used by enimal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.8 of the Code of Virginia. This record shell be clientained for at least five years, and must be made available for public inspection upon request. Information on this form is to be submarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed in the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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Danville Police Department Animal Control Unit (434) 548-3017



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I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be imiglediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours' before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the

Danville Police Department Animal Control Unit (434) 548-3017

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This form may be used by enimal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.8 of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed formet. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

Danville Police Department Animal Control Unit (434) 548-3017

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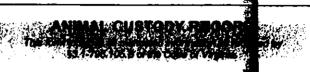
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This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane society, or highere investigators to record and maintain the information required by \$3.1-796.105.8 of the Code of Virginia. This record shell be insantained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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Signatur

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No other person has a right of property in the animal, and I surrender all property rights in such animal euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also above-described animal back.

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Signate

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I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also

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No other person has a right of property in the animal. I acknowledge the animal may be implicitly euthanized or disposed of in accordance with 3.2-6548, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I align acknowledge that I will be required to follow the adoption policies and procedures if I decided want the above-described animal back.	•	No oti euthar possib allowir ackno	ner person hi nized or dispole, the Danving them to bo wiedge that	as a right osed of in tille Area I e adopted I will be re	of property in the accordance with lumane Society I. I acknowledge equired to follow	e animal. I a h 3.2-6546, : will keep ow o that may no	cknowled subsectio mer-reles ot be posi	ge the a on D, sub used anir sible in a	nimal may divisions mals for 2- ill cases, a	be imp 1 through 4 hours and I also	diately 5. When efore
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6-15-24 Camerine Animal Control Public	CUSTODY WAS TAKEN 3 12 06	100	URAS	ADBITIONAL INFORMATION		TOR	APROX. AP	2-8 1-45 1#	at apply; or indicate "none")	COLLAR OTHER IDENTIFICATION (specify) (Color, type, etc.)	NONE detected	DATE	6-15-24	DATE	(a-27-24)
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Danville Police Department

Animal Control Unit (434) 548-3017

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This form may be used by enimal control officers, custodians of any pound or shelter, representatives of a humane society, or the mane investigators to record and maintain the information required by \$3.1-796.105.B of the Code of Virginia. This record shall be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be administrated and submitted annually to the State Veterinarian in the prescribed formet. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

VDACS 03145 (Revised 7/06)

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This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane society, officers investigators to record and maintain the information required by \$3.1-796.105.8 of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

Danville Police Department Animal Control Unit (434) 548-3017

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This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.8 of the Code of Virginia. This record shell be made available for public inspection upon request. Information on this form is to be summarized and the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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	,	REASON	FOR CUSTO	DY (i. vark appr	opriate box)		LOCA	TION WHE	RE
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• I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the above-described animal back.

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I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide? I want the above-described enimal back.

Signatu

TIME CUSTODY 2 50 AMPM 37361 6-19-24 DATE REASON FOR CUSTODY (mark appropriate box) LOCATION WAS TO KEN 374 Transfer from Owner Stray Seized Bite Case Surrender other Other locality/facility DA H5 ED'S NAME & ADDRESS (If known) ADDITIONAL INFORMATION Com't Keep No conger M-Sp: KeBIKM Kuro Ackus ANMAL DESCRIPTION **SPECIES** BREED APPROX. COLORMARKINGS APPROX. OTHER AGE WEIGHT Chir X BIACK 1 yr 12.4 erma Whalben SF 15# 1440 ANIMAL IDENTIFICATION (complete all that apply, or indicate "none") **CITY/COUNTY** RABIES TAG COLLAR LICENSE NUMBER TATTOO NUMBER OTHER IDENTIFICATI (Color, type, etc.) N (specify) Nine NONE None CUSTODY RECORD PREPARED BY Di SIGNATURE & TITLE 6-21324 This form may be used by animal control officers, custodians of any pound or sheller, representatives of a humane social facilities. investigators to record and maintain the information required by the Code of Virginia. This record shall be

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This form may be used by enimal control officers, custodiens of any pound or sheller, representatives of a humane society or humane investigators to record and maintain the information required by \$3.1-796.105.B of the Code of Virginia. This record shell be maintained for investigators to record and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be difficult to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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I am the rightful owner of the above-described animal, and I surrender all property rights such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 thinguph 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the above-described animal back.

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Danville Police Department Animal Control Unit (434) 548-3017

ANIMAL CUSTODY RECORD

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This form may be used by enimal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.8 of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

Danville Police Department Animal Control Unit (434) 548-3017



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This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by §3.1-796.105.8 of the Code of Virginia. This record shall be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summerized and submitted annually to the State Veterinarian in the prescribed formet. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

Danville Police Department ANIMAL GUSTODY REGO **Animal Control Unit** (434) 548-3017 **CUSTODY DATE** CASE NO. 37282 REASON FOR CUSTODY (mark appropriate box). Transfer from Owner Stray Seized Bite Case other Other Surrender locality/facility OWNER'S NAME & ADDRESS (H. known) ADDITIONAL - Frind W Telephone: **ANIMAL DESCRIPTION** APPROX. APPROX. **SPECIES** BREED COLOR/MARKINGS SEY OTHER AGE WEIGHT K9 Pitbull brnlwht LeOlbs work 2yrs ANIMAL IDENTIFICATION (complete all that apply, or indicate "none") CITY/COUNTY **RABIES TAG** COLLAR TATOO OTHER IDENTIFICATE DN (specify) LICENSE NUMBER NUMBER (Color, type, etc.) No Ne realtha JUDY NONE NON **CUSTODY RECORD PREPARED BY** TE SIGNATURE & TITLE **DISPOSITION OF ANIMAL**

This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.B of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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Danville P	olice De	partment		Animai Control	Danville Area	Humane Sc	clety	Pittsyn	⁄ania Anin	nai Con	trolPubl
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I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the above-described animal back.

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This form may be used by enimal control officers, custodians of any pound or shelter, representatives of a humane society, or higher investigators to record and maintain the information required by 53.1-796.105.B of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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• I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 throught. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the above-described animal back.

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This form may be used by enimal control officers, custodians of any pound or shelter, representatives of a humane society, or farmane investigators to record and maintain the information required by \$3.1-796.106.8 of the Code of Virginia. This record shell bifuncintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be stimmarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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Danville Po	lice Dec	artment	Danvil	le Ar	nimal Control	Dany	ille Area H	lumane Soc	iety	Pittayiv	enle /	volemail (pntro	Public Public
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This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.106.8 of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the above-described animal back.

Signature_____

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Danville Po	lice Department	Danvii	le Animal Control	Danville Area I	lumane So	ciety	Pittsviv	ania /	Vnimal C	ontroi	Public
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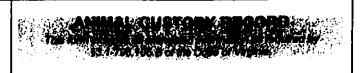
No other person has a right of property in the animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the above-described animal back.

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## **Danville Police Department**

Animal Control Unit (434) 548-3017



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This form may be used by enimal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.106.8 of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summerized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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• I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the above-described animal back.

Signature____

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No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adopted. I acknowledge that may not be possible in all cases, and I also acknowledge that I will be required to follow the adoption policies and procedures if I decide I want the

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### **Danville Police Department**

Animal Control Unit (434) 548-3017



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This form may be used by enimal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.B of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

REASON FOR CUSTODY (mark appropriate box)  CUSTODY STAKE  Stray Comer Seized Bits Case Transfer from CUSTODY STAKE  Stray Comer Seized Bits Case Transfer from CUSTODY STAKE  Survivors Seized Bits Case Transfer from CUSTODY STAKE  OWNER'S NAME & ADDRESS (If known)  ADDITIONAL INFORMAT N  Telephone:  ANIMAL DESCRIPTION  SPECIES BREED COLORANARGINGS SEX APPROX APPROX APPROX ANIMAL IDENTIFICATION (complete all that apply, or Indicate "none")  CITY/COUNTY RAISESTAG TATTOO (COLLAR (Color, typs, etc.) OTHER IDENTIFICATION (special color, typs, etc.) OTHER IDENTIFICATION (special color, typs, etc.) OTHER IDENTIFICATION (special color, typs, etc.)  CUSTODY RECORD PREPARED BY ANIMAL COLLAR (Color, typs, etc.) OTHER IDENTIFICATION (special color, typs, etc.) DATE:  SIGNATURE & TITLE Mary (Date of type, type) (special color, typs, etc.) DATE:  DISPOSITION OF ANIMAL  EACH DATE  DISPOSITION OF ANIMAL  DATE  Tolephone  Disposition of Animal (type) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special color) (special co	Danville P	Sice Departme	AM/DM	e Animai Control CUSTODY	Danville Area			1	vania Animai (	Control Pu
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Danville Po	ice Department			Danville Area H	umane Soci	etyPittsyl	vanla A	nimal Co	ntrol_ Public
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## Danville Police Department Animal Control Unit (434) 548-3017



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This form may be used by enimal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.8 of the Code of Virginia. This record shall be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summerized and submitted annually to the State Veterinarian in the prescribed formet. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

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I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before allowing them to be adented. I acknowledge that may not be possible in all cases, and I also acknowledge that may not be possible in all cases, and I also acknowledge that may not be possible in all cases.

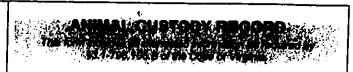
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Danville Po	ilce Dep	artment	Danvilk	Anim	nal Control	Dany	ille A <u>rea H</u>	umane Soc	ety	Pittsylve	nia Ani	ma Con	trolPublic
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years, and mi	ust be i State	nade zv Veterina	allable for parties in the	public presci	: Inspection ( ribed format.	Que	request.	Information	n on this	form is	to be a	nertz	ed and submitted ffice of the State
Veterinarian, (8	904) 786	⊢2483, P	.O. Box 116	3, Ridi	hmond, VA 23	218.		•			D		
Name					Control Corp	(eesau		-				200	
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Signatu

## Danville Police Department

Animal Control Unit (434) 548-3017



GASE NO.	3738:	3	CUSTODY DAT	FE 6-5	7-2	<del></del> -	THE	2:11	AM /PN
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This form may be used by enimal control officers, custodians of any pound or sheller, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.8 of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed formet. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

	DICE DEPARTMENT		CLIPTODY	Danville Area I	Humane So	ciety	Pittsylvar	nia Animai C	ontrol Public
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Stray	Owner Surrender	Seized	Bite Case	Transfer from other locality/facility	Othe	, /	1	<u> </u>	W TAKEN
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SIGNATURE &	TITLE &	A						6	25-24
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nually to the	State Veterinari	en in the o	officers, custodians rmation required by ubits inspection up rescribed format. Richmond, VA 232	Ounettone man	or shelter, i /irginia. Th information rding this f	representa its record on this for form may	tives of a shalf be rm is to I be direct	maintaine be summed and to the	ociety, or humane of for at least five ted and submitted Office of the State
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s the anima	al bitten or scr	ratched a	person or anima	l within the p	est 10 d	ays?			
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natureS	Act		mal and I relinqu	usn custoay	to the Da	IUAIIIS VU	ea Hun	nane Soci	ety.
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# Danville Police Department Animal Control Unit (434) 548-3017



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CASE NO. 3	1385		CUSTODY DAT	E	6- S	8-24	·	· Ti	ME:	1170			/ PM
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This form may be used by enimal control officers, custodians of any pound or sheller, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.B of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

### **Danville Police Department Animal Control Unit**

(434) 548-3017



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			Ec	eH.	) :	300	-			7-1	1-0	DY

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#### 17.700.108.8 G as Capt 6.7 **Animal Control Unit** (434) 548-3017 CASE NO. **CUSTODY DATE** 37387 REASON FOR CUSTODY (mark appropriate box). Stray Seized Bite Case Other other Surrender locality/facility OWNER'S NAME & ADDRESS IN KNOWN) ADDITIONAL INFORMATION pSee ACO Crowd unk Telephone: ANIMAL DESCRIPTION APPROX. **SPECIES** APPROX. **BREED COLOR/MARKINGS** SEX OTHER AGE WEIGHT Pitbull VONO ANIMAL IDENTIFICATION (complete all that apply, or indicate none) CITY/COUNTY **RABIES TAG** COLLAR **TATOO** LICENSE NUMBER NUMBER OTHER IDENTIFICATI (specify) (Color, type, etc.) NONE /\foN CUSTODY RECORD PREPARED BY SIGNATURE & TITLE **DISPOSITION OF ANIMA** Seith

**Danville Police Department** 

This form may be used by animal control officers, custodians of any pound or shelter, representatives of a humane society, or humane investigators to record and maintain the information required by \$3.1-796.105.B of the Code of Virginia. This record shell be maintained for at least five years, and must be made available for public inspection upon request. Information on this form is to be summarized and submitted annually to the State Veterinarian in the prescribed format. Questions regarding the use of this form may be directed to the Office of the State Veterinarian, (804) 786-2483, P.O. Box 1163, Richmond, Virginia 23218.

TIME	12:30 F	M/PM	CUSTODY DATE	6.0	18.24	No. 24	I.D. Case/i	No. 37	388 313
	EASON FO	OR CUSTO	ODY (mark appr	opriate bo	c)		L	OCATION	WHERE
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nually to the terinarian, (8)	State Veterinari 04) 786-2483, P.C	an in the pr D. Box 1163,	filoers, custodiens of mation required by sbile inspection up secribed format. C Richmond, VA 2321	tuestions rega 8.	rding this f	Telepho		ted to the	Office of the S
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Signat

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I am the rightful owner of the above-described animal, and I surrender all property rights in such animal. No other person has a right of property in the animal. I acknowledge the animal may be immediately euthanized or disposed of in accordance with 3.2-6546, subsection D, subdivisions 1 through 5. When possible, the Danville Area Humane Society will keep owner-released animals for 24 hours before adoption policies and procedures if I decide I want the

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