Dog Breed Dog Color(s) Other ID Dog's Yr. of Birth Last 2 Digits Markings Dog's Name Downer Identification (Person who harbors or keeps dog): Last First Middle Initial Mailing Address: House No. Street or R.D. No. and P.O. Box No. City County Town, City or Village County Town, City or Village C A T T A R A U G U S Y O R K S H I R E TYPE OF LICENSE LICENSE TYPE DOG LICENSE LICENSE TYPE Serial Number Serial Num	TE REQUIRED
Code(s) Code	
One Year Va Date Vaccinated Veterinarian OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial Mailing Address: House No. Street or R.D. No. and P.O. Box No. Phon City Town, City or Village C A T T A R A U G U S Y O R K S H I R E Prype OF LICENSE Fee Spay/Neuter Fee Limbale. neutered ORIGINAL RENEWAL Date Vaccinated Veterinarian OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial OW Owner Identification (Person who harbors or keeps dog): Last First Middle Initial	
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Owner Identification (Person who harbors or keeps dog): Last First Middle Initial Mailing Address: House No. Street or R.D. No. and P.O. Box No. Phon City State Zip County Town, City or Village C A T T A R A U G U S Y O R K S H I R E TYPE OF LICENSE 1.00Male, neutered Property Response of the property of the	
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Mailing Address: House No. Street or R.D. No. and P.O. Box No. Phon City State Zip Town, City or Village C A T T A R A U G U S Y O R K S H I R E TYPE OF LICENSE Fee Spay/Neuter Fee 9.00 1.00 LICENSE FEE	Area Code
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County Town, City or Village C A T T A R A U G U S Y O R K S H I R E TYPE OF LICENSE GMale, neutered State Zip Town, City or Village Y O R K S H I R E	No.
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County Town, City or Village C A T T A R A U G U S Y O R K S H I R E TYPE OF LICENSE GMale, neutered Spay/Neuter Fee 9.00 1.00 LICENSE FEE LICENSE FEE	
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1. DMale, neutered 9.00 1.00 LICENSE FEE	
2. [Female, spay:d 9.00 1.00 Spay/nei/ferefe	
19 00	
3. Male, unneutered 18.00 3.00 ENUMERATION FEE	
4. Female, unspayed	

Owner's Signature

Date

Clerk's Signature

Date