



Genesee County Animal Control

G-4351 West Pasadena Ave. Flint, MI 48504 810-732-1660 fax: 810-732-1493

Transfer Information

Animal Name: IRC 10

Internal Animal ID: 6665

Microchip ID (if any):

Species: DOG

Current Intake Date: 4-19-16

Breed(s): PIT MIX

Age: 2yrs Weight: 20lbs Color & Markings: Ben/white

S/N: N If yes, Date Completed and Any Complications:

Any Previous Owner Information:

Vaccines:

Canine Distemper/Parvovirus date: 4-19-16

Bordetella date: 4-19-16

Rabies date: 4-22-16

by: Cathy Anderson DVM

Other Medical Concerns or Medications with Dates: SEE MEDICAL ATTACHED

Behavior Test Performed? No or Yes: If yes, list date: _____
Tests Performed and Specific Results:

Shelter/Rescue Name: Michigan Animal Care
Address: 14151 LAKESIDE
City: Shelby Twp State: MI Zip: 48315
Phone: 586-613-3526

Diane Linn
Signature

Paul M
Printed Name & Title

5/6/16
Date



Genesee County Animal Control

G-4351 West Pasadena Ave. Flint, MI 48504 810-732-1660 fax: 810-732-1493

Transfer Information

Animal Name: Clemy 362-364

Microchip ID (if any):

Internal Animal ID: 7723

Current Intake Date: 8-2-16

Species: cat

Breed(s): Pat Mix

Age:

Weight: 40

Color & Markings: Tan

M / F

S/N: No If yes, Date Completed and Any Complications:

Any Previous Owner Information: No

Vaccines:

Canine Distemper/Parvovirus date: 8-2-16

Bordetella date: 8-2-16

Rabies date: 8-3-16

by: Dr. McCormick

Other Medical Concerns or Medications with Dates: SEE ATTACHED

Behavior Test Performed? No or Yes if yes, date: _____

Tests Performed and Specific Results:

Shelter/Rescue Name: Mich. Animal Care, agrees to provide the animal the following:

1. Food, water, shelter, in accordance with Michigan State Law
2. Proper and continuing veterinary care, including the upkeep of City, County, and State law required vaccines and licenses
3. Adopt this animal as a companion pet
4. Rescue agency shall save, defend, indemnify and hold Genesee County Animal Control and the County of Genesee, their officials, employees, and agents, harmless from and against all loss, cost, liability, damage, expense (including, without limitation, reasonable attorneys' fees), penalties, fines and claims whatsoever in connection with the loss of life, injury, death, and damage to property arising from the adoption of this animal.

Address: 14151 Lakeside
Shelby Twp.
586-247-6200

City, State, Zip: Flint, MI 48315

Handwritten Signature 8/4/16



Genesee County Animal Control

G-4351 West Pasadena Ave. Flint, MI 48504 810-732-1660 fax: 810-732-1493

Transfer Information

Animal Name: 362-364

Microchip ID (if any):

Internal Animal ID: 7637

Current Intake Date: 7-23-16

Species: Canine

Breed(s): Pit mix

Age: 2? Weight: 46.1

Color & Markings: white

M / F

S/N: No If yes, Date Completed and Any Complications: prego - to far along

Any Previous Owner Information: No

Vaccines:

Canine Distemper/Parvovirus date: 7/23/16

Bordetella date: 7/23/16

Rabies date: 7/25/16

by: Dr. McCormick

Other Medical Concerns or Medications with Dates: SEE ATTACHED

Behavior Test Performed? No or Yes If yes, list date: _____
Tests Performed and Specific Results:

Shelter/Rescue Name: MPED agrees to

provide the animal the following:

1. Food, water, shelter, in accordance with Michigan State Law
2. Proper and continuing veterinary care, including the upkeep of City, County, and State law required vaccines and licenses
3. Adopt this animal as a companion pet
4. Rescue agency shall save, defend, indemnify and hold Genesee County Animal Control and the County of Genesee, their officials, employees, and agents, harmless from and against all loss, cost, liability, damage, expense, (including, without limitation, reasonable attorneys' fees), penalties, fines and claims whatsoever in connection with the loss of life, personal injury and /or damage to property arising from the adoption of this animal.

Address: Terey Hodobins

City: _____ State: _____ Zip: _____

Phone: 248-933-4662

Signature [Handwritten Signature]

Printed Name & Title Rachel Clink

Date 8.6.16



Genesee County Animal Control

G-4351 West Pasadena Ave. Flint, MI 48504 810-732-1660 fax: 810-732-1493

Transfer Information

Animal Name: 89.91 Jasper

Microchip ID (if any):

Internal Animal ID: 7656

Current Intake Date: 7/25/16

Species: Canine

Breed(s): BASSET MIX

Age: 1 1/2 Weight: 32 lbs

Color & Markings: Tan/Blk M / F

S/N: YES If yes, Date Completed and Any Complications: 8.3.16 AAA

Any Previous Owner Information: No

Vaccines:

Canine Distemper/Parvovirus date: 9.25

Bordetella date: 7.25

Rabies date: 8.3.17

by: ALL ABOUT ANIMALS

Other Medical Concerns or Medications with Dates: SEE ATTACHED

Behavior Test Performed? No or Yes If yes, list date: 8.2.16

Tests Performed and Specific Results:

Shelter/Rescue Name: Mich. Animal Crew, agrees to

provide the animal the following:

1. Food, water, shelter, in accordance with Michigan State Law
2. Proper and continuing veterinary care, including the upkeep of City, County, and State law required vaccines and licenses

3. Adopt this animal as a companion pet.

4. The adopter/agency shall sole defend, indemnify and hold Genesee County Animal Control and the County of Genesee, their officers, employees and agents, harmless from and against all loss, cost, liability, damage, expense, including without limitation, reasonable attorneys' fees, penalties, fines and court costs, and all other claims, damages, personal injury and/or damage to property arising from the adoption of this animal.

14151 Lakeside

Shelby Twp.

586.247.6200

Flint, MI 48315

Low Man 814116



Genesee County Animal Control

G-4351 West Pasadena Ave. Flint, MI 48504 810-732-1660 fax: 810-732-1493

Transfer Information

Animal Name: 89-91

Microchip ID (if any):

Internal Animal ID: 7750

Current Intake Date: 8-3-16

Species: X-9

Breed(s): JACK RUSSETT

Age: Senior Weight:

Color & Markings: White/Black M F

S/N: NO If yes, Date Completed and Any Complications:

Any Previous Owner Information:

Vaccines:

Canine Distemper/Parvovirus date: 8-3-16
Bordetella date: 8-3-16
Rabies date: 8-4-16

by: T. McCormick, DVM

Other Medical Concerns or Medications with Dates:

See ATTACH 1

Behavior Test Performed? No or Yes If yes, list date: _____

Tests Performed and Specific Results:

Shelter/Rescue Name: Michigan Animal Care agrees to provide the animal the following:

1. Food, water, shelter, in accordance with Michigan State Law
2. Proper and continuing veterinary care, including the upkeep of City, County, and State law required vaccines and licenses
3. Adopt this animal as a companion pet
4. Rescue agency shall save, defend, indemnify and hold Genesee County Animal Control and the County of Genesee, their officials, employees, and agents, harmless from and against all loss, cost, liability, damage, expense, (including, without limitation, reasonable attorneys' fees), penalties, fines and claims whatsoever in connection with the loss of life, personal injury and /or damage to property arising from the adoption of this animal.

Address: 14151 Lakeside

City: Shelby Twp

State: MI Zip: 48315

Phone: 586 615-3526

[Signature]
Signature

Joseph Quinn
Printed Name & Title

8-20-16
Date

Medical read



Genesee County Animal Control

G-4351 West Pasadena Ave. Flint, MI 48504 810-732-1660 fax: 810-732-1493

Transfer Information

Animal Name: NIA Microchip ID (if any): None

Internal Animal ID: 15225 Current Intake Date: 11-7-18

Species: Dog Breed(s): Mixed

Age: adult Weight: _____ Color & Markings: Blk/white M F

S/N: NO If yes, Date Completed and Any Complications:

Any Previous Owner Information: Stray

Vaccines:

Canine Distemper/Parvovirus date: 11-7-18

Bordetella date: 11-7-18

Rabies date: 11-7-18

by: Dr. McCormick DVM

Other Medical Concerns or Medications with Dates: **PLEASE SEE ATTACHED MEDICAL HISTORY**

Behavior Test Performed? No or Yes If yes, list date: _____

Tests Performed and Specific Results:

Shelter/Rescue Name: Michigan Animal Crew agrees to provide the animal the following:

1. Food, water, shelter, in accordance with Michigan State Law
2. Proper and continuing veterinary care, including the upkeep of City, County, and State law required vaccines and licenses.
3. Adopt this animal as a companion pet
4. Rescue agency shall save, defend, indemnify and hold Genesee County Animal Control and the County of Genesee, their officials, employees, and agents, harmless from and against all loss, cost, liability, damage, expense, (including, without limitation, reasonable attorneys' fees), penalties, fines and claims whatsoever in connection with the loss of life, personal injury and /or damage to property arising from the adoption of this animal.

Address: 14151 Lakeside

City: Shelby Twp. State: MI Zip: 48315

Phone: C 1(586) 615-3526

[Signature]
Signature

Glen Martin
Printed Name & Title

11/8/18
Date

[Signature]
Signature

Danielle Martin (vc)
Printed Name & Title

11-8-18
Date



Genesee County Animal Control

G-4351 West Pasadena Ave. Flint, MI 48504 810-732-1660 fax: 810-732-1493

Transfer Information

Animal Name: N/A Microchip ID (if any): NONE
 Internal Animal ID: 15226 Current Intake Date: 11-7-18
 Species: ~~PI~~ DOG Breed(s): MIXED
 Age: PUPPY Weight: _____ Color & Markings: BRINDLE/WHITE W F
 S/N: NO If yes, Date Completed and Any Complications: _____

Any Previous Owner Information: STRAY

Vaccines:

Canine Distemper/Parvovirus date: 11-7-18
 Bordetella date: 11-7-18
 Rabies date: 11-7-18 by: Dr. McComick DMV

Other Medical Concerns or Medications with Dates: **PLEASE SEE ATTACHED MEDICAL HISTORY**

Behavior Test Performed? No or Yes If yes, list date: _____

Tests Performed and Specific Results: _____

Shelter/Rescue Name: Michigan Animal Crew agrees to provide the animal the following:

1. Food, water, shelter, in accordance with Michigan State Law
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Address: 14151 Lakeside
 City: Shelby Twp. State: MI Zip: 48315
 Phone: C 1(584) 615-3526

[Signature]
Signature

Glen Martin
Printed Name & Title

11/8/18
Date

Shree Williams
Signature

Shree Williams ACS
Printed Name & Title

11-8-18
Date