



LOST ANIMAL REPORT

DATE REPORTED: _____ DATE LAST SEEN: _____

BREED OF PET: _____

DOG _____ MALE _____ COLLAR: _____

CAT _____ FEMALE _____ I.D. TAG: _____

OTHER _____ AGE _____

SPAYED / NEUTERED _____

MICROCHIP # _____

NAME OF PET: _____

DESCRIPTION OF PET:
(color, etc.) _____

LOCATION LAST SEEN: _____

PET OWNER'S NAME: _____

ADDRESS: _____

NEAREST CROSS ROAD: _____

HOME# _____ CELL# _____ WORK# _____

*Please forward a picture of the Pet via email to: AnimalControl2@Madera-County.com

