

EXHIBIT D
CLIENT INFORMATION

ZOONOSIS CONTROL PROGRAM ANIMAL FRIENDLY GRANT
DSHS CONTRACT NO: [INSERT]
Contract Term: August 31, 2027, through August 30, 2028

A separate application must be completed for each animal being sterilized. Successful applicants for the grant may use this form as a template or may require additional information from their clients.

Client last name: _____ First name: _____

Address: _____

City: _____ State: _____

Home phone: _____ Work phone: _____

Animal name: _____ Species: _____ Sex: _____

Breed: _____ Color: _____

Completed by:

Print Name: _____

Signature: _____

Date Sterilization was Performed: _____

Name of Veterinarian: _____

Dollar Amount _____