## Affidavit of Death or Disposal of Dog

I hereby certify that the	ne following dog,		
Dog Name:			
Dog Address:			
Dog Sex (circle one):	Male / Female	Neutered Male /	Spayed Female
which was listed by the provisions of the Wiscons		_	ve in compliance with the ed of as follows:
Date Died:		Date Sold or Given A	Away:
Signature			
Printed Name			