## VILLAGE OF MINONG MULTIPLE DOG LICENSE APPLICATION

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I,			, re	esiding at			
am red	questing to ha	rbor the fo	ollowing do	gs upon my purc	hasing a multij	ple dog license:	
Dog Name	Sex B	<u>reed</u>	<u>Color</u>	Date <u>Vaccinated</u>	Due <u>Date</u>	Vaccine Mfg. <u>&amp; Serial No.</u>	
-	e dog licenses	are subjec		_		multiple dog license is ne provisions of Village	
signature of Dog C	Owner(s):			Date:			
Signature of Dog C		<del> </del>	Date:				
Date of Board Approva License Issuance Date: Special Conditions:	al:						
		STATE	MENT OF	DEATH OR DIS	SPOSAL		
, County, Wisconsin,		, residing	g at		in	, Washburn	
ereby certify that th	ne following des	cribed dog:					
lame:		Sex:		Breed:			
lge:		Color:		Marking	gs:		
as died or been disp	oosed of as follo	ws:					
Pate of Death:							
Date of Sale (or Gift t	o another):						
Name of person fillin	ng out form:						
Signature of person filling out form:				Date:			