



67 Hayes St
Stafford, VA 22556
540-270-9141

TRANSFER IN AGREEMENT

Agent _____ Name of Shelter / Rescue Group _____

Legal Address of shelter / rescue group _____

Do hereby voluntarily and irrevocably transfers and releases to Meow Stories the following Animal(s), hereafter collectively referred to as "animal(s)". Furthermore, I have authority to act as an agent for named organization, represent and warrant I have full power and authority to transfer the animal(s) to Meow Stories. No other person or entity has any legal or equitable interest in described animal(s):

| Name | Sex | Age | Species | Description |
|-------|-------|-------|---------|-------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

Furthermore, the representative of abovenamed Shelter or Rescue Group acknowledges and agrees to the following statements (please initial all statements to signify your agreement):

- _____ Agree to relinquish all ownership or other interest in the animal(s).
- _____ All material information regarding the medical and behavioral history of the animal(s) described has been disclosed to Meow Stories.
- _____ All medical records and information pertaining to the animal(s) have been willfully surrendered to Meow Stories.
- _____ The animal has not bitten anyone in the last 10 days.

Meow Stories agrees to accept responsibility and ownership of the animal(s) described at their own risk and release _____ of ownership of the animal(s) effective the date of this contract.

All interested parties have fully read and understand this Transfer Agreement, and furthermore accept and agree to abide by its terms.

Agent Name _____ Signature _____

Meow Stories Agent Accepting Transfer: _____

67 Hayes St Stafford, VA 22556j

Executed on this _____ day of _____ in the year _____