



RESILIENT ENVIRONMENT DEPARTMENT
ANIMAL CARE DIVISION
2400 SW 42nd Street • Fort Lauderdale, Florida 33312 • 954-359-1313

Animal Care Trust Fund Sub-Committee Reimbursement Qualification Checklist

PERSON/ RESCUE PARTNER REQUESTING REIMBURSEMENT:

NAME: _____

Meeting Date: _____ 2025

Checklist

- Trust Fund Rules send
Copy of all invoices marked PAID
MEDICAL HISTORY from your vet, where your animal was treated, INCLUDING ALL RESULTS
Completed CHRONOLOGICAL TIMELINE HISTORY form
AFFIDAVIT – letter stating that you have not received any money (including donations) from 3rd parties to pay for your bills (SIGNED and Notarized)
Any additional pictures or proof that could help your claim

PLEASE CHECK-MARK ALL APPLICABLE BOXES

Emergency Reimbursement

- Director or Committee Authorization
Veterinarian statement received
Funds available

Post-Adoption or Rescue-Pull Reimbursement

- Adopted/Rescued from shelter
Adoption within 30 days of reimbursement request
Medical or surgical in nature
Could not be dealt with adequately by County Veterinarian
Written request received indicating why owner/rescue group cannot afford to pay expenses
Treatment is not the result of apparent abuse or neglect by the owner/rescue group

Financial Need Reimbursement

- Sterilized or agrees to sterilize animal
Has rabies vaccine and license or agrees to have vaccinated and licensed
Written request received indicating why owner cannot afford to pay expenses
Funds available

Extraordinary Shelter Expenses

- Director Authorization
Services not provided by County Animal Clinic
Funds available

Total Amount of charges: \$_____

Funds available: _____
Director



RESILIENT ENVIRONMENT DEPARTMENT
ANIMAL CARE DIVISION
2400 SW 42nd Street • Fort Lauderdale, Florida 33312 • 954-359-1313

Date: _____

Name: POPO PITBULLS RESCUE

Address: 1136 NE 17th WAY
FORT LAUDERDALE FL 33304

Re: Animal Care Advisory Sub-Committee Trust Fund Reimbursement

Dear Sir or Madam;

Thank you for contacting Animal Care and Adoption Animal Care Sub-Committee Trust Fund.

Attached please find the information requested to present your case to the Advisory Board – Trust Fund Sub-Committee:

1. Trust Fund Rules
2. Copy of **all invoices** marked **paid**
3. **Medical history** from your vet where your animal was treated, **including test results**
4. Completed **Chronological History Timeline** (form attached)
5. **An affidavit** / letter or e-mail stating that you have not received any money (**including donations**) from 3rd party to pay for these bills
6. Any additional pictures or proof that could help your claim

Please send all documentation to me via e-mail.

If you have any additional questions, please don't hesitate to contact me.

Sincerely,

Animal Care Division

NAME	POPO PITBULLS RESCUE
Address	1138 NE 17th Way Fort Lauderdale, FL 33304
Telephone Number	954 254-6655
Animal Name	LAFLEY NIKA HUBREY
Animal ID#	A2367340
Date of adoption	RESCUE TRAFFER 7/21/2024

Chronological History Timeline:

Date: 7/15/2024

POPO PITBULLS RESCUE PLACED HOLD ON LAFLEY FOR TRANSPORT TO MICHIGAN. AT THE TIME WE WERE TOLD HE WAS NEUTERED & READY TO GO

Date: 7/20/2024

TRANSPORT WAS NOT SUBSCRIBED, BUT WE HAD ADOPTER & FOSTER OFFER RE LAFLEY SO HE REMOVED HIM FROM TRANSPORT LIST

Date: 7/21/2024

WHEN WE CAME TO PICK HIM UP WE LEARNED HE WAS ONLY NEUTERED A FEW DAYS BEFORE DESPITE HIS LISTING ON PET HARBOR SAYING HE WAS A NEUTERED MING BEFORE HE WAS NEUTERED

WE RULLED LAFLEY & HE WANTS HOME TO ORLANDO WHERE HIS ADOPTER, THOMAS MUNN, LIVES

Date: 7/23/2024

MR MUNN TOOK LAFLEY TO THE VET AS HIS INCISION AREA WAS SWOLLEN & RED. THE INCISION WAS INFECTED & VET HAD TO ACT QUICKLY TO AVOID A SCARVE POTENTIALLY LIFE THREATENING SITUATION. ASKED IF WE WOULD BRING HIM BACK TO BROWARD COUNTY ANIMALLY BUT SITE FOR IT WAS TOO LOW OF A DRIVE A DELAY FOR THE SEVERITY OF THE INFECTION SURGERY WAS PERFORMED THAT DAY. LAFLEY HAS MADE A FULL RECOVERY.

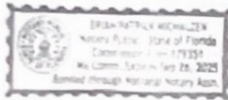
ONE OF THE REASONS WE HADN'T REALIZED HE WAS ONLY JUST NEUTERED WAS HE WASN'T WEARING A CONE. ASKED ABOUT THIS AND WAS TOLD NOT ALL THE DOGS GET A CONE AFTER SURGERY. THIS MEANS HE WAS ABLE TO BITTER THE INCISION SITE FROM THE MOMENT IT WAS DONE.

NAME: POPO PIRBULLS RESCUE	
Address: 1134 NE 17th Way, Fort Lauderdale R 33304.	
Telephone Number: 954 242 3134	
Animal Name Laffey	
Animal ID# A2367340	
Date of adoption: 7/21/2024	

I, POPO RESCUE have not received any money from a 3rd party for the above animal veterinary care.

C. LORWISH POPO RESCUE
Print Name:

[Signature]
Signature:



FOR AN ACKNOWLEDGMENT IN AN INDIVIDUAL CAPACITY:
STATE OF FLORIDA
COUNTY OF DADE
The foregoing instrument was acknowledged before me this 21st day of July, 2024
by CLARE CHEWIS Owner, Popo Pirbulls Rescue
(Signature of Name)
(PRINT NAME) CLARE CHEWIS
Office of Notary Public
United States of America
Personally Known OR Proved by Affidavit
True of Identification Produced [Signature]
41646464

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No dog, cat, nonhuman primate, or additional kinds or classes of animals designated by USDA regulation shall be delivered to any intermediate handler or carrier for transportation in commerce, unless accompanied by a health certificate executed and issued by a licensed veterinarian (7 U.S.C. 21.43.9; CFR, Subchapter A, Part 2).

OMB APPROVED
0579-0036
0579-0333

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

UNITED STATES INTERSTATE AND INTERNATIONAL
CERTIFICATE OF HEALTH EXAMINATION
FOR SMALL ANIMALS

WARNING: Anyone who makes a false, fictitious, or fraudulent statement on this document, or uses such document knowing it to be false, fictitious, or fraudulent may be subject to a fine of not more than \$10,000 or imprisonment of not more than 5 years or both (18 U.S.C. 1001).

1. TYPE OF ANIMAL SHIPPED (select one only)
 Dog Cat Other _____
 Nonhuman Primate Ferret Rodent

2. CERTIFICATE NUMBER - OFFICIAL USE ONLY

3. TOTAL NUMBER OF ANIMALS
1

4. PAGE
1 of 1

5. NAME, ADDRESS, AND TELEPHONE NUMBER OF OWNER (CONSIGNOR)
 Broward County Animal Care
 2400 SW 42nd street
 Ft. Lauderdale, FL 33312
 (954)359-1313

6. NAME, ADDRESS, AND TELEPHONE NUMBER OF RECIPIENT AT DESTINATION (CONSIGNEE)
 Popo Pitbulls Rescue
 640 Marquette Ave
 Muskegon MI
 Alexis Robertson

USDA License/or Registration Number (if applicable)

7. ANIMAL IDENTIFICATION

NAME, AND/OR TATTOO NUMBER OR OTHER IDENTIFICATION	BREED - COMMON OR SCIENTIFIC NAME	AGE	SEX	COLOR OR DISTINCTIVE MARKS OR MICROCHIP
(1) Laffy ID# A2367340	American Staff	13m	n	Black
(2) 900139000570878			Brown	
(3)				
(4)				
(5)				
(6)				

8. PERTINENT VACCINATION, TREATMENT, AND TESTING HISTORY

RABIES VACCINATION		OTHER VACCINATIONS, TREATMENT, AND/OR TESTS AND RESULTS	
<input checked="" type="checkbox"/> 1 YEAR <input type="checkbox"/> 2 YEARS <input type="checkbox"/> 3 YEARS			
Vaccination Date	Product	Date	Product Type and/or Results
07/20/24	Rabvac Lot #E129453A	6/10/24	Bordetella
	EXP: 09/15/25	6/10/24	DAPPVL4
		6/10/24	Interceptor, Nexgard
		7/20/24	HW test: Negative

9. REMARKS OR ADDITIONAL CERTIFICATION STATEMENTS (WHEN REQUIRED)

VETERINARY CERTIFICATION: I certify that the animals described in box 7 have been examined by me this date, that the information provided in box 8 is true and accurate to the best of my knowledge, and that the following findings have been made ("X" applicable statements).

I have verified the presence of the microchip, if a microchip is listed in box 7.

I certify that the animal(s) described above and on continuation sheet(s), if applicable, have been inspected by me on this date and appear to be free of any infectious or contagious diseases and to the best of my knowledge, exposure thereto, which would endanger the animal or other animals or would endanger public health.

To my knowledge, the animal(s) described above and on continuation sheet(s) if applicable, originated from an area not quarantined for rabies and has/have not been exposed to rabies.

ENDORSEMENT FOR INTERNATIONAL EXPORT (IF NEEDED)
 PRINTED NAME OF USDA VETERINARIAN

NAME, ADDRESS, AND TELEPHONE NUMBER OF ISSUING VETERINARIAN
 Lori Walter, DVM
 Broward County Animal Care
 2400 SW 42nd street
 Ft. Lauderdale, FL 33312
 (954)359-1313

LICENSE NUMBER AND STATE
 VM10495

Accredited Yes No
 If yes, please complete below

NATIONAL ACCREDITATION NUMBER
 013928

SIGNATURE OF USDA VETERINARIAN Apply USDA Seal or Stamp here **DATE**

NOTE: International shipments may require certification by an accredited veterinarian.
SIGNATURE OF ISSUING VETERINARIAN **DATE**
 07/20/24

INVOICE

#754964

Invoice date:
25th July 2024

Customer Name:
Munn, Thomas

Animal Name:
Luffy



Description	Staff Member	Qty	Total
Cerenia 41-60 lbs	Brooke Delaney, DVM	1	\$72.56
z Inventory Used Hydromorphone 2mg/ml	Brooke Delaney, DVM	0.9	\$0.00
Lab Hema CBC Abaxis In House	Brooke Delaney, DVM	1	\$74.96
Lab Abaxis CDP Diag Profile Chem	Brooke Delaney, DVM	1	\$123.59
Convenia 31-50 lbs	Brooke Delaney, DVM	1	\$138.22
Injection Rimadyl 50 mg/ml	Brooke Delaney, DVM	1	\$47.22
Marboquin 50mg Tablet	Brooke Delaney, DVM	21	\$125.50
12 Proheart 41-60 lbs	Brooke Delaney, DVM	1	\$171.62
Injection Hydromorphone 2 mg/ml	Brooke Delaney, DVM	1	\$46.07
Surg Catheter Iv + Fluids	Brooke Delaney, DVM	1	\$103.41
Injection Induction	Brooke Delaney, DVM	1	\$39.16
z Inventory Used Propofol	Brooke Delaney, DVM	1	\$0.00
Anesthesia Iso 1st 30min	Brooke Delaney, DVM	1	\$154.20
Anesthesia/Sedation Monitoring	Brooke Delaney, DVM	1	\$39.66
Procedure Setup & Clean up	Brooke Delaney, DVM	1	\$56.45
Surgery Supplies	Brooke Delaney, DVM	1	\$48.99
Surgical Prep	Brooke Delaney, DVM	1	\$42.46
Biohazard Waste/OSHA Compliance	Brooke Delaney, DVM	1	\$9.50
Surg Skin Laceration Rep Mod Per Cut	Brooke Delaney, DVM	1	\$515.00
Surg Mass External 2-4cm W/O Margins	Brooke Delaney, DVM	1	\$199.41
Antech Culture Aerobic C&S M020	Brooke Delaney, DVM	1	\$161.93
Anesthesia Iso Additional Anesthesia min	Brooke Delaney, DVM	20	\$133.60
z Inventory Used Dexdomitor Dexmedetomidine	Brooke Delaney, DVM	0.01	\$0.00
Injection Ondansetron 2 mg/ml	Brooke Delaney, DVM	1	\$40.47
Vetprofen 25mg Flavored Tablet	Brooke Delaney, DVM	15	\$26.80

Subtotal: **\$2370.78**

Including tax: **\$2370.78**

Total: **\$2370.78**

Payment method: **Terminal : -1937.00**

Terminal : -433.78

Amount paid: **\$2370.78**

Balance: **\$0.00**

Thank you for choosing Winter Park Veterinary Hospital

1601 Lee Road Winter Park, Florida, 32789 • (407) 644-2676 • wpvet@wpvet.net



Broward County Animal Care and Adoption Division

2400 SW 42nd St, Ft. Lauderdale, FL 33312
Phone: 954-359-1313



MEDICAL HISTORY REPORT



Animal ID#

A2367340

Name

LAFFY

Breed

AMERICAN STAFF / MIX

Color

TAN/WHITE

Age

1 YR/1 MO

Date of birth

June 11, 2023

As of: 7/20/2024

Sex:

NEUTERED MALE

06/10/2024

Condition: IMPOUND

Weight: 38.00

Treated by: 3128

Visit Type / Reason

FIELD INTAKE

Treatments

BORDETELLA
DAPPV L4

NA
NA

Medications

Comments

* Flea & Tick Topical.

06/11/2024

Condition: SEE DIAG

Weight: 40.50

Treated by: 0859321

Visit Type / Reason

EXAM / INITIAL

Treatments

DIAGNOSIS-HEALTHY NOADVERSEHE/

Medications

STRONGID, 1x per day for 1 day(s)

Comments

* Tech Exam

History: Brought in by ACO from BSO

TPR: not able to obtain

PE: BAR, FAS= 1/5, able to do full exam very nice but nervous with quick movements

Treatment: Interceptor given

Preventive care administered at intake as shown on medication list. Monthly heartworm and internal parasite prevention provided monthly while in shelter.

07/20/2024

Condition: SEE DIAG

Temp: 100.10 Weight: 42.50

Treated by: 1125043

Visit Type / Reason

Treatments

Medications

SURGERY / ADOPTION ELIZABETHAN E COLL/ NA
IDEXX HEARTWORM S NEGATIVE
NEUTER/DOG NA
SMART MICROCHIP NA

METACAM INJECTABLE, 1x per day for 1 day(s)
0.55 TTDEX, 1x per day for 1 day(s)

Comments

* G000734

Anesthesia was induced using an injectable combination of sedatives

Maintenance: endotracheal tube, isoflurane

Patient was aseptically prepared for surgery. A midline pre-scrotal incision was made, both testicles were exteriorized, and the left and right spermatic cords were ligated and inspected for bleeding. The subcutaneous tissue was sutured. An intradermal pattern with absorbable monofilament suture was used to suture skin. Tissue glue was applied to incision. A green tattoo was applied on the abdomen to indicate patient has been sterilized. A microchip was inserted.

Discharge instructions:

1. Exercise restriction: no running, jumping, playing with people or other animals, or long walks
2. Do not bathe for 10 days
3. Suture removal not necessary
4. Monitor incision for discharge, redness, swelling. If green, yellow or thick bloody discharge is present please take pet to a veterinarian immediately.
5. Keep e-collar on at all times for 10 days following surgery.

07/20/2024

Condition: SEE DIAG

Weight: 42.50

Treated by:

Visit Type / Reason

Treatments

Medications

MED RELEASE

Comments

* THIS ANIMAL HAS BEEN APPROVED FOR SAME DAY SURGERY PICK UP.
ADOPTER IS AWARE THAT THIS ANIMAL WILL/MAY HAVE RESIDUAL SIDE EFFECTS FROM ANESTHESIA. THIS INCLUDES (BUT NOT LIMITED TO) DILATED/CONSTRICTED PUPILS, UNSTEADY WALK, AGGRESSIVE BEHAVIOR, & POSSIBLE VOMITING. ADOPTER WILL MONITOR THEIR ANIMAL THROUGHOUT THIS PERIOD. ALL FURTHER TREATMENTS/EXPENSES THAT MAY ARISE THROUGHOUT THIS RECOVERY PERIOD ARE THE RESPONSIBILITY OF THE ADOPTER AT THEIR OWN VET. BCAC WILL NOT BE RESPONSIBLE. ADOPTER ACKNOWLEDGES THAT BCAC DOES NOT OFFER AFTER HOURS CARE.

Post-Surgical Care Instructions:

Anesthesia can cause nausea and vomiting, we suggest that you only offer your pet ½ of his or her normal meal size post-surgery. Normal feeding should continue the following day.

Keep your pet calm. Patients' recovering from surgery should have limited exercise. No running, jumping, bathing, climbing on furniture, playing with other pets or with humans, or other strenuous activities for 10-14 days. Remember to keep your pet indoors, it is crucial to avoid possible infection. Walk your pet on a leash to allow him/her to urinate or defecate and do not take your pet for long walks during this time.

Check the incision site daily for swelling, redness or discharge. Any swelling should be minimal and resolve within 48 hours. A small amount of yellow-orange discharge is normal the first 48 hours. If there is yellow-green discharge, excessive swelling or bruising, or a large amount of blood, please seek veterinary care immediately. Do not allow your pet to lick his or her incision site. If an E-collar was provided it must stay on pet at all times for 10 days. Failure to do so may result in infection, dehiscence (opening of surgical site) and the need for further surgical attention. If sutures are present on incision, they are due to be removed 10 days after surgery.

Thank you for adopting!

Signature: _____

Date: _____

RABIES VACCINATION CERTIFICATE



Rabies Vaccination Date: 06/24/2024

VETERINARY CLINIC

Broward County Animal Care and Adoption
2400 SW 42nd Street
Ft Lauderdale, FL 33312
(954) 359-1313

OWNER OF ANIMAL

Name: POPO PITBULLS RESCUE
Address: 0
City/State/Zip: PLANTATION, FL

This is to certify...

THAT THE FOLLOWING ANIMAL HAS BEEN VACCINATED AGAINST RABIES.

Patient Information:

Pet ID #: A2367340	Tag No: U24-391935
Patient: LAFFY	Date Issued: 06/24/2024
Species: DOG	Tag Expiration: 06/24/2025
Breed: AMERICAN STAFF/MIX	License Type: RABIES CERT
Color: TAN/WHITE	
Age: 1 yr 1 mo	
Sex: NEUTERED MALE	

Rabies Vaccination Information:

Vaccine Product Name: RABVAC	Term: 12 Months
Lot Expiration: 09/19/25	
Lot number: E129452A	
Veterinarian: G000517	

Next Rabies Vaccination Due: 06/24/2025

Veterinarian Signature: 

MICROCHIP CERTIFICATE



VETERINARY CLINIC

Broward Co. Animal Care & Adoption
2400 SW 42nd Street
Ft Lauderdale, FL 33312
(954) 359-1313

OWNER OF ANIMAL

Name: POPO PITBULLS RESCUE
Address: 0
City/State/Zip: PLANTATION, FL

This is to certify...

that the animal described below has received a microchip identification implant

Patient Information:

Pet ID #:	A2367340	Microchip:	900139000570878
Patient:	LAFFY	Date Issued:	07/20/2024
Species:	DOG	Age:	1 YEAR 1 MONTH
Breed:	AMERICAN STAFF/MIX	Sex:	Neutered Male
Color:	TAN/WHITE		

Microchip Manufacturer Information:

The brand of microchip your pet has is **MC SMART TAG**

How do microchips work?

Microchips have a unique number. When a handheld scanner is moved over the animal's body the scanner can read the number on the microchip. The microchip company is then called and the number given to the operator. The operator is then able to look in their database for the pet's information. Most veterinary offices, shelters and humane society's now have scanners and use them on all animal's that come in their doors.

If your address or phone number changes, it is important that you update your contact information with us as well as Found Animals.

Your pet's microchip requires to be manually activated by visiting their website: <https://www.idtag.com/user/register>. It's best to contact the microchip company to verify that the correct information is on file.

If your address or phone number changes, it is important that you update your contact information with us as well as your pet's microchip company.

You can update your information with us by visiting our website at <https://webapps.broward.org/PetsLicense/PetUpdate.aspx>

While microchipping is a great way for you to protect your pet should they become lost, it is very important that your pet wear a collar, rabies license and identification tag at all times. Research has proven that visible ID tags with the owner's name and phone number