

Dog License Form:

Name: _____ Date: _____

Address: _____ Amount Received: _____

Name of Animal: _____ Markings: _____ Male ___ Female ___ Unsexed ___

Breed:

Boxer ___

Bull ___

Chihuahua ___

Chow ___

Collie ___

Dachshund ___

Great Dane ___

Hound ___

Mixed Breed ___

Pekingese ___

Poodle ___

Setter ___

Shep. ___

Spaniel ___

Terrier ___

Other _____

License Tag No _____

Expires _____

I hereby acknowledge receipt of amount indicated above, being the amount due for pet license for one pet as described above. You are authorized to keep said pet without further payment until Pet Dues for next fiscal year become due.

By: City of Oakland