ANIMAL LICENSE License Expires 12/31/2025

Issued by:

Town of Shelby

608-788-1032

Melissa Erdman 2800 Ward Ave

La Crosse

WI 54601

		_		
Primary Owner (First Name - Middle Initial - Last Name): DOB: DL#:				
Secondary Owner (First Name - Middle Initial - Last Name): DOB: DL#:				
Street Address (House # - Street - City - State - Zipcode):				
Mailing Address (House # - Street - C	ity - State - Zipcode):			ent : • •
Home Phone: Other Phone:				
Tag #: Date Issued: Animal Sex: Male: \$24.00 Neutered: \$13.00 Proof Of Current Rabies Vaccination: Circle The Fee: Male: \$24.00 Spayed: \$13.00 Other:				
Clinic:	Rabies #:	Vacci	nation Date:	Expiration Year:
Animal Name:	Color:			Animal DOB:
Major Breed:	Minor Breed:		Other Br	eed:
Tag #: Date Issued: Animal Sex: Male: \$24.00 Neutered: \$13.00 Proof Of Current Rabies Vaccination: Circle The Fee: Male: \$24.00 Spayed: \$13.00 Other:				
Clinic:	Rabies #: Vaccination Date:		Expiration Year:	
Animal Name:	Color:	- In-		Animal DOB:
Major Breed:	Minor Breed:		Other Breed:	