



Please Don't Litter  
Feral and Stray Spay/Neuter Voucher

Caretaker Section

The City of Veneta's 2014-2015 Please Don't Litter Campaign is a Trap-Neuter-Return (TNR) program designed to control the population of feral and stray cats in our community and improve their quality of life.

Veneta Friends of Ferals, a volunteer organization, is responsible for coordinating efforts to help residents in all aspects of the TNR program. This includes TNR training, trap rentals, providing trapping supplies and assisting with paperwork. These are the step that you will need to complete.

- Step 1:** Contact a Representative of the Veneta Friends of Ferals for a Consultation.  
Call City of Veneta at (541) 935-2191 ask for Teresa Warrick, Code Enforcement Officer.
- Step 2:** Contact one of the two veterinarian clinics and schedule an appointment for surgery.
- Step 3:** Contact the City of Veneta if you need to rent a trap, (541) 935-2191
- Step 4:** Fill out this voucher form and bring it with you to your appointment at the clinic you've chosen.

This voucher is good for one (1) spay or neuter surgery and ear-tipping of a stray or feral cat performed at one of the veterinarian clinics listed below. Any additional medical treatments, vaccines, tests or euthanasia services will be the responsibility of the person applying for this voucher.

Please initial that you are in compliance and agree with each of the following statements:

- \_\_\_ I am within the 97487 Zip Code
- \_\_\_ I have contacted and discussed trapping with a representative of Veneta Friends of Ferals.
- \_\_\_ I have my own trap, or I have completed a rental agreement.
- \_\_\_ I understand that any complications or surgery follow-up must be handled by the clinic that performed the surgery. Medical or other care provided by another clinic will not be covered.
- \_\_\_ I would like someone from Veneta Friends of Ferals to contact me about future Volunteer Opportunities.

This form must be completed for every feral/stray cat spay or neuter surgery.

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address/Location Cat Was Found: \_\_\_\_\_

Please check the box of the Clinic that you have chosen:

- Clinic:     Veneta Veterinary Hospital                       WAG  
                    88233 Territorial Rd                                      3045 Royal Ave  
                    Veneta, OR 97487                                      Eugene, OR 97402  
                    (541) 935-4151                                      (541) 345-3566



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**For Veterinarian Use Only**

Resident has provided proof of residency within the 97487 by way of:

- Driver's License       Utility Bill       Other: \_\_\_\_\_

Surgery Date: \_\_\_\_\_ Type:  Spay       Spay in Heat       Spay with Pregnancy  
 Neuter       Anesthesia Only       Other \_\_\_\_\_

Approximate age: \_\_\_\_\_

Physical Description (breed, color(s), short/long hair, identifying markings, etc.): \_\_\_\_\_

Any conditions that prevented Feral/Stray from being spayed/neutered:

Name of Veterinarian who performed Surgery:

**Request for Surgery reimbursement**

I hereby certify the above-described cat is a feral /stray and its caretaker resides within the 97487 zip code and qualifies for reimbursement under the City of Veneta Please Don't Litter Campaign.

\_\_\_\_\_  
Signature of Veterinarian

\_\_\_\_\_  
Date

Please mail this form and clinic invoice to: City of Veneta, PO Box 458, Veneta Oregon 97487  
or  
twarrick@ci.veneta.or.us

**CITY USE**

Reimbursement: Approved (    ) Denied (    )

Date Payment Sent: \_\_\_\_\_ Check #: \_\_\_\_\_