

CITY OF CALUMET CITY  
ANIMAL LICENSE  
EXPIRES DECEMBER 31st

FOR OFFICE ONLY

LICENSE NO.

AMOUNT \_\_\_\_\_

Last First Middle

DATE \_\_\_\_\_  
ISSUED BY \_\_\_\_\_

Address \_\_\_\_\_

M  F

DOG

CAT

Phone \_\_\_\_\_

Name of Animal \_\_\_\_\_ Markings \_\_\_\_\_

Breed of Animal \_\_\_\_\_ Color \_\_\_\_\_

RABIES # \_\_\_\_\_ DUE DATE \_\_\_\_\_

I HEREBY ACKNOWLEDGE RECEIPT AMOUNT INDICATED ABOVE, BEING THE AMOUNT DUE FOR ANIMAL LICENSE FOR ONE ANIMAL AS DESCRIBED ABOVE. YOU ARE AUTHORIZED TO KEEP SAID ANIMAL WITHOUT PAYMENT UNTIL ANIMAL TAX FOR NEXT YEAR BECOMES DUE.