

**COMPASSION IN ACTION, INC.**  
**1598 State Route 6**  
**Factoryville, PA 18419**  
**(800) 971-2377**

**Spay Neuter Assistance**

Name:

Address:

Phone number:

Number of animals:

Are any of these animals used for breeding purposes?

If so, how many litters do you breed annually?

Please list your pets below.

Include species (dog/cat); breed; age; sex (and indicate if spayed/neutered); and if the pet is up to date on vaccinations.

Primary veterinarian:

Primary veterinarian's phone:

May we contact your vet to verify the information you've provided?

Your annual household income: (Include all forms of income.) – ask about public assistance?

Number of adults living in your home:

Number of children living in your home:

Are you willing and able to submit information to verify your income? (For example, a copy of the prior year's tax return.)

To qualify for funding, we require you to make an effort to obtain the best price in your area. This helps us maximize our limited resources. When calling for pricing information, be sure to ask about additional costs, such as vaccinations (if needed) and extra charges for pets in heat or pregnant (if applicable).

Have you contacted your local animal protection groups, SPCA, Humane Society, etc. to see if they offer low-cost spay/neuter programs? If so, please list all of the organizations you've contacted and their phone numbers below. If they have a spay/neuter program, please include the price they quoted to perform the surgery on your pet(s). Make a separate list for each pet if necessary.

Have you contacted all local veterinarians to see if they offer low-cost spay/neuter programs or if they'll accept a payment plan for you to spay/neuter your pet(s)? If so, please list the veterinarians you've contacted, their phone numbers, and the price they quoted to perform the surgery on your pet(s).

Please state the maximum amount you can afford to contribute toward the surgery. Please consider that the more you contribute, the more surgeries we can afford to subsidize. Additionally, if our funding is low and you're unable to contribute adequately toward the cost, we not be able to assist you.

Please include any notes or extenuating circumstances you feel may be pertinent: