

**NOTICE OF DOG DECEASED OR SOLD**

TODAY'S DATE	
DOG OWNER	
ADDRESS	
DOG'S NAME	
BREED	
REASON NOT LICENSED (CIRCLE ONE)	DECEASED      SOLD      OTHER:
DATE OF OCCURRENCE	
OWNER'S SIGNATURE	

Please return completed form to the Town Treasurer.

Town of Mitchell  
Attn: Town Treasurer  
W8095 Parnell Rd  
Cascade, WI 53011