

**Form O**  
**DAILY AND WEEKLY ANIMAL COUNT**

Rehabilitation Center \_\_\_\_\_

**Date**

--	--	--	--	--	--	--

**Received**

Captured						
Transferred						
Born						
Other						
<b>Total Received</b>						

**Departed**

Died						
Euthanized						
Transferred						
Released						
Escaped						
<b>Total Departed</b>						

**Alive at Center**

Females						
Males						
Pups						
<b>Total Present</b>						