



Veterinary Collaboration Letter – Standardized Form

Each Veterinary Clinic will submit their fee structure range for sterilizations for dogs and cats on this standardized form. This is a required attachment for all grant application submissions.

If there are more than four veterinarians per practice, use multiple forms to provide the necessary information. Thank you

Veterinarian Name: _____ License # _____

Male Dog _____ Male Cat _____

Female Dog _____ Female Cat _____

Veterinarian Name: _____ License # _____

Male Dog _____ Male Cat _____

Female Dog _____ Female Cat _____

Veterinarian Name: _____ License # _____

Male Dog _____ Male Cat _____

Female Dog _____ Female Cat _____

Veterinarian Name: _____ License # _____

Male Dog _____ Male Cat _____

Female Dog _____ Female Cat _____

Veterinarian Owner Name: _____ License # _____

Veterinary Clinic Name, Address and Telephone Number: _____

Clinic Telephone Number:

Veterinarian Clinic Owner Signature: _____