



**Animal Rescue League of Iowa, Inc.
Transfer Partner
Adoption Affidavit**

Animal Information

Animal ID: _____ Name: _____
Breed: _____ Gender/Altered: _____
ARN: _____ DOB: _____ Type: _____ Age: _____
Colors: _____ Pattern: _____ Size: _____ Microchip#: _____

PLEASE RETURN THIS COMPLETED ADOPTION AFFIDAVIT TO THE ARL IMMEDIATELY UPON ADOPTION

This adoption affidavit attests, by virtue of the details below, the transfer of care/ownership of the above identified animal (the "transferred animal") from the Animal Rescue League of Iowa, Inc. to the indicated Transfer Partner for the purpose of placing the transferred animal in the home of an Adopter; and the subsequent placement of the transferred animal into the Adopter's home by the Transfer Partner.

Transfer Partner Information

Organization Name: _____ Transfer Date: _____
Street Address: _____
City: _____ State: _____ ZIP: _____
Contact Name: _____ Phone: _____ Email: _____

Adoption Information

Adopter's Name: _____ Adoption Date: _____
Adopter's City and State: _____

The agent signing for the Transfer Partner attests that the information above is true and correct, to the best of his/her knowledge.

Transfer Partner: _____ Date: _____

By: _____ (its authorized agent)