

THE \$20 FIX: AnimalKind's Financial Assistance Program for Pet Spay/Neuter

Your Name: _____ Where did you get this application? _____

Physical Address (of your home): _____

City: _____ State: _____ Zip: _____ In what county do you live? _____

Mailing Address (if different from physical address): _____ City: _____ State: _____ Zip: _____

Daytime Phone: _____ Evening Phone: _____ E-mail: _____

Your Age: _____ Number of Adults in Household (including you): _____ Number of Children in Household: _____

Only in extreme circumstances, AnimalKind may be able to reduce the \$20 co-pay (the amount you pay). YES, please have someone contact me about reducing the co-pay.

Important note about privacy: The financial information you provide will be used only for confirmation of your eligibility and will not be used for any other purposes. For additional protection of your private information, please mark through the Social Security numbers on all copies of documents.

What photocopied documents are you enclosing with your application as proof of eligibility for assistance? (Please see back for details.)

Copy of your own adult Medicaid card _____ OR Copy of your own Food Stamps card _____ OR

Copy of page 1 of Income Tax Return for each adult in your household _____ (only needed if you don't have Medicaid or Food Stamps card).

What is your current household income per month from all sources (the amount before taxes are taken out)? _____

Note about Income: If you think you qualify based on your current income but did not file taxes, or your income has decreased since last tax return, please enclose a note of explanation and your best proof of current income (for example, copies of W-2 forms, check stubs, etc.).

Please list any other assistance programs from which your household gets help: _____

Please list your pets that need spay/neuter surgery:

We cannot issue vouchers for feral or stray cats or dogs. Please contact SpayNC Helpline at 1-888-623-4936 for other resources.

Dog or Cat	Pet's Name	Sex	Description or Breed	Pregnant? In Heat?	Approx. Age	Approx. Weight

I understand that THE \$20 FIX vouchers are for pets owned by me—the applicant. The information I have provided about myself, my pets, and my household income is accurate and truthful. I have enclosed a photocopy of my Medicaid or Food Stamps card or the best proof I have of my total household income. Fraudulent use of THE \$20 FIX program will result in services charged to me at full price and possible legal action against me and others involved in the fraudulent use of vouchers.

Signature: _____ Date: _____

Please mail completed application and photocopied documents to: **AnimalKind--THE \$20 FIX, PO Box 12568, Raleigh, NC 27605**. If you need help filling out application, please call **919-870-1660** or **1-877-870-1660** (toll free) or e-mail: thefix@animalkind.org. Fax to **919-890-0705**, and please contact us to confirm that we receive your fax. Please do not mail payment with application.

(Office use only--Form 01-13-12) Reviewer:	Date	Approved	Denied	Professional Referral (Name/Position/Contact Info):

How do I use THE \$20 FIX pet spay/neuter program?

1. Complete this application and mail to:

AnimalKind--THE \$20 FIX, PO Box 12568, Raleigh NC 27605
If you need help filling out the application, please call 919-870-1660 or 1-877-870-1660 (toll free) or email: thefix@animalkind.org. Fax to 919-890-0705.

2. You will receive the voucher(s) by mail:

If you are not accepted into THE \$20 FIX program, you will be notified. If your application is approved, you will receive the voucher(s) within 2 weeks. The voucher works like a "coupon" for your pet's surgery. It is accepted only at participating vets, can be used for your pet only, and is valid for 3 months.

3. You call a participating veterinarian to make an appointment:

You will receive a list of participating vets with your voucher. Call to make your vet appointment immediately after receiving your voucher. Appointment space may fill up fast and your voucher has an expiration date!

Your pet must be at least 3 months old to get spayed or neutered. Minimum weight varies by vet—generally 2 pounds for a cat and 2-10 pounds for a dog. (Minimum age for a rabies shot is 4 months.)

The vet can answer any questions about spay/neuter surgery and your pet's health.

4. You take your pet(s) to the vet appointment:

Take cash with you. You must pay the co-pay amount of **\$20 per pet in cash** to the vet when you drop off your pet. You should be prepared to show your picture ID at the vet's office.

Take your pet's current rabies certificate if you have one. If you do not have rabies paperwork with you, the vet may give your pet a rabies shot, as required by law—and the cost is covered by your co-pay. (The rabies tag is not sufficient proof of vaccination.)

Be on time for your vet appointment! If you must cancel, be sure to call the vet several days before the appointment so someone else's pet can use the space!

Do I qualify for THE \$20 FIX pet spay/neuter program?

You must be a resident of Caswell, Durham, Orange, Person, or Wake County in North Carolina to participate in THE \$20 FIX.*

You must own the cat or dog. THE \$20 FIX cannot provide assistance for stray or feral animals and you cannot apply for vouchers to use for someone else's pet. *

THE \$20 FIX program is for residents who have no other options for financial assistance for pet spay/neuter. Our funds are limited so it is important that we serve those who need our help the most.*

College students who receive any financial support from parents are not eligible for THE \$20 FIX unless their parents also qualify financially.*

There are two ways to qualify:

Note: Copy machines are often found at libraries, post offices, drugstores, and office supply stores.

1. Enclose a copy of your own adult Medicaid card or Food Stamps card. (Medicaid and Food Stamps recipients automatically qualify.)

2. OR, enclose a copy (just the first page) of the last tax return of each adult in your household. To qualify without a Medicaid or Food Stamps card, the combined gross income (amount before taxes are deducted) for your entire household must fall within these guidelines:

1-person household (you)	\$17,000 or less
2-person household	\$22,000 or less
3-person household	\$28,000 or less
4-person (or more) household	\$33,000 or less

If you qualify by current income but did not file taxes, or your income has decreased since your last tax return, please enclose a note of explanation and your best proof of income (W-2's, check stubs, etc.).

*Please contact SpayNC Helpline at 1-888-623-4936 (1-888-NC FIX EM) for information about programs available to residents who do not qualify for THE \$20 FIX, live in other counties, or need help with feral or stray animals.



THE \$20 FIX
Spay or Neuter Your Pet for \$20 or Less

919-870-1660 or

1-877-870-1660 (toll free)

www.animalkind.org