

City of Auburn  
Dog/Cat License Year \_\_\_\_\_ (Expires 12/31/\_\_\_\_)

Date

Owner Name

Address

Telephone #

Check appropriate box (or boxes):

Dog  Cat

Dog/Cat Name

Female  Male  Spayed  Neutered

Breed

Color

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City Office Use Only

Amount Paid

Tag No. Rabies Tag No. Expiration

Veterinarian Proof of Rabies Vaccination

Veterinarian Proof of Alteration or Detrimental to Health

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Auburn City Clerk's Office  
City of Auburn  
1101 J Street  
Auburn, NE 68305

Ref. Ordinance No. 4-95