

STATE OF CONNECTICUT  
DEPARTMENT OF AGRICULTURE  
165 CAPITOL AVENUE  
HARTFORD, CT 06106

# MUNICIPAL ANIMAL CONTROL OFFICERS REPORT

PAGE 1 OF 1	TOWN Berkeshire Falls	PAGES 1
MONTH July		
YEAR 2020		

NUMBER	DATE IN	AD DATE	DATE OUT	ANIMALS DISPOSED OF THIS MONTH ONLY - FILL IN TOTALS ON PAGE ONE ONLY			TOTAL COMPLAINTS INVESTIGATED	TOTAL ANIMAL BITES	TOTAL INFRACTIONS/SUMMONS	NAME AND ADDRESS OF OWNER OR KEEPER	DESCRIPTION OF ANIMAL INCLUDE - BREED, COLOR, SEX, AGE AND LICENSE # IF APPLICABLE	TYPE OF COMPLAINT	REDEEMED	SOLD AS PET	D.O.A.	EUTHANIZED	TOTAL	REDEEMED	SOLD AS PET	D.O.A.	EUTH.	CARRY OVER																	
				SOURCE	REDEEMED	SOLD AS PET																																	
1	7-20-21	7-20-21	7-20-21	▲	1	0	0	0	0	1	22	0	0	0	0	0	1	0	0	0	0		X																
				COMPLAINANT NAME AND ADDRESS			Joe Capote 11 BIRWOOD																																
				TYPE OF COMPLAINT			Stray																																
				DESCRIPTION OF ANIMAL INCLUDE - BREED, COLOR, SEX, AGE AND LICENSE # IF APPLICABLE			Labo Yellow Male Steve Mlinski 24 BIRWOOD																																
				NAME AND ADDRESS OF OWNER OR KEEPER																																			

PERSONALLY APPEARED AND MADE OATH TO THE TRUTH OF THE STATEMENTS IN THIS REPORT

PRINT M.A.C.O.'S NAME: **Patrick Dionne** DATE: **10/6/2020**

STATE OF CONNECTICUT COUNTY OF: **New Haven**

SIGNATURE OF M.A.C.O.: *[Signature]*

NOTARY PUBLIC (Signature): *[Signature]* DATE: **10/6/2020**

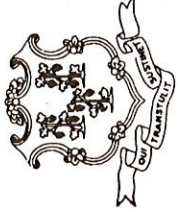
NOTARY PUBLIC: **LEONARD C. GREENE** MY COMMISSION EXPIRES: **JAN 31 2024**

TOTALS FOR THIS PAGE ONLY: **1 0 0 0 0**

TOTALS FOR THIS MONTH REPORT: **1 0 0 0 0**

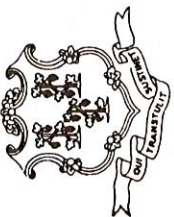
FILL IN TOTALS ON PAGE ONE ONLY.

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				SOURCE	REDEEMED	SOLD AS PET	D.O.A.	EUTHANIZED					
				IMPOUNDED ANIMALS ONLY	0	0	0	0	0	0			
	<p>FILL IN THIS SECTION ON PAGE ONE ONLY OF THIS REPORT. USE THE FIRST PAGE TO LIST ANIMALS CARRIED OVER FROM LAST MONTH. START A NEW PAGE FOR ANIMALS IMPOUNDED THIS MONTH.</p>												
COMPLAINANT NAME AND ADDRESS				DESCRIPTION OF ANIMAL INCLUDE - BREED, COLOR, SEX, AGE AND LICENSE # IF APPLICABLE				NAME AND ADDRESS OF OWNER OR KEEPER					
TYPE OF COMPLAINT													
PERSONALLY APPEARED AND MADE OATH TO THE TRUTH OF THE STATEMENTS IN THIS REPORT				SIGNATURE OF M.A.C.O.				TOTALS FOR THIS PAGE ONLY.					
PRINT M.A.C.O.'S NAME STATE OF CONNECTICUT COUNTY OF: New Haven				Patrick Dionne DATE: 10/6/2020				0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
NOTARY PUBLIC (Signature) LEONARD C. GREENE NOTARY PUBLIC MY COMMISSION EXPIRES JAN. 31, 2021				Patrick H MY COMMISSION EXPIRES NOTARY PUBLIC MY COMMISSION EXPIRES JAN. 31, 2021				TOTALS FOR THIS MONTHS REPORT. FILL IN TOTALS ON PAGE ONE ONLY.					
TOWN				BEACON FALLS				MONTH YEAR 2020					



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PAGE 1 OF 1  
PAGES

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NUMBER	DATE IN	AD DATE	DATE OUT	COMPLAINANT NAME AND ADDRESS	TYPE OF COMPLAINT	DESCRIPTION OF ANIMAL INCLUDE - BREED, COLOR, SEX, AGE AND LICENSE # IF APPLICABLE	NAME AND ADDRESS OF OWNER OR KEEPER	ANIMALS DISPOSED OF THIS MONTH ONLY - FILL IN TOTALS ON PAGE ONE ONLY					TOTAL INFRACTIONS/ SUMMONS	TOWN	MONTH	YEAR	REDEEMED	SOLD AS PET	D.O.A.	EUTH.	CARRY OVER												
								SOURCE	REDEEMED	SOLD AS PET	EUTHANIZED	TOTAL										TOTAL COMPLAINTS INVESTIGATED	TOTAL ANIMAL BITES										
2	9/15/19	9/15/19	9/15/19	Mambou Rezia 17 Munson	HBC	Cat DSH Female Black/White			0	0	0	47	1	0																			

PERSONALLY APPEARED AND MADE OATH TO THE TRUTH OF THE STATEMENTS IN THIS REPORT SIGNATURE OF M.A.C.O. \_\_\_\_\_  
 PRINT M.A.C.O.'S NAME: Patrick Dionne  
 DATE: 10/6/2020  
 STATE OF CONNECTICUT NOTARY PUBLIC (Signature)  
 COUNTY OF: New Haven  
 LEONARD C. GREENE  
 NOTARY PUBLIC  
 MY COMMISSION EXPIRES JAN 31, 2021

TOTALS FOR THIS PAGE ONLY:

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