CAT SPAY/NEUTER \$50.00 VOUCHER REQUEST

This program is funded through a grant from the **Joanie Bernard Foundation**



To participate in this program, you declare under penalty of perjury that

- You are a resident of Brown County Ohio and,
- You receive one of the following one benefits and/or meet the income qualifications.

- Medicaid - TANF (Temporary Aid to Needy Families)

Unemployment - Subsidized School Lunch Program/SMP/NSLP

- WIC - Section 8 Public Housing

- SNAP/Food Stamps - Social Security Disability

Household Size	Gross Income Less Than	Household Size	Gross Income Less Than
l person	\$18,090	5 persons	\$43,170
2 persons	\$24,360	6 persons	\$49,440
3 persons	\$30,360	7 persons	\$55,710
4 persons	\$36,900	8 persons	\$61,980

- BCHS voucher(s) provided to you cover a portion of the spay/neuter surgery cost ONLY. The owner
 is responsible for any additional expenses associated with the office visit and surgery, example
 general examination and rabies vaccination.
- Each Voucher has a 60-day expiration date from the date of issue and has no cash value.
- The voucher must be given to the participating veterinary practice at the time of surgery.
- Privacy policy: All Information you give BCHS is confidential.

Complete and mail this voucher re	quest to: BCHS, P.O. Box 228, Georgetown, Ohio 45121.
Owner Name:	
Address:	
City:	Zip Code:
Phone:	Email: (optional)
Number of individuals in household:	
Number of vouchers requested (up to 3):	□ 1 □ 2 □ 3

Vouchers will be mailed out within 2 weeks of receipt & review of your application.