



# Kent County Dog License

7/1/23-6/30/24

<b>Owners Name:</b> _____  <b>Address:</b> _____ _____  <b>Phone Number:</b> _____	<b>Dogs Name:</b> _____  <b>Breed/Color:</b> _____ _____  <b>Age—Male/Female:</b> _____
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**Rabies Tag #:** \_\_\_\_\_      **Vaccination Expires:** \_\_\_\_\_  
**Vaccination Agent:** \_\_\_\_\_

\_\_\_\_\_ **Neutered/Spayed \$5.00**  
\_\_\_\_\_ **Regular \$10.00**

Pursuant to the provisions of Article 56, Section 191, section 18-318 of the Health-General Article of the Annotated Code of Maryland and Article 1, Chapter 2 of the Public Laws of Kent County, Maryland.

Patricia M. Merritt, CFO

Issuing Agent

For Office of Finance use only		
_____	_____	_____
License#	Date Issued	Amount Paid