

RESILIENT ENVIRONMENT DEPARTMENT

ANIMAL CARE DIVISION

2400 SW 42nd Street • Fort Lauderdale, Florida 33312 • 954-359-1313

Animal Care Trust Fund Sub-Committee Reimbursement Qualification Checklist

	PERSON/ RESCUE PARTNER REQUESTING REIMBURSEMENT:
NAME:	Monique Logtenberg Meeting Date: April 24, 2025
Check	Trust Fund Rules send Copy of all invoices marked PAID MEDICAL HISTORY from your vet, where your animal was treated, INCLUDING ALL RESULTS Completed CHRONOLOGTICAL TIMELINE HISTORY form AFFIDAVIT — letter stating that you have not received any money (including donations) from 3 rd parties to pay for your bills (SIGNED and Notarized) Any additional pictures or proof that could help your claim
	SE CHECK-MARK ALL APPLICABLE BOXES
	Director or Committee Authorization Veterinarian statement received Funds available
Post-A	Adoption or Rescue-Pull Reimbursement
	Adopted/Rescued from shelter Adoption within 30 days of reimbursement request Medical or surgical in nature Could not be dealt with adequately by County Veterinarian Written request received indicating why owner/rescue group cannot afford to pay expenses Treatment is not the result of apparent abuse or neglect by the owner/rescue group
Financ	cial Need Reimbursement
0	Sterilized or agrees to sterilize animal Has rabies vaccine and license or agrees to have vaccinated and licensed Written request received indicating why owner cannot afford to pay expenses Funds available
Extrac	ordinary Shelter Expenses
	Director Authorization Services not provided by County Animal Clinic Funds available
Total Am	ount of charges: \$854,04 Funds available:

NAME Monique Logtenberg
Address 461 NW 162 Ave Pembrole Pines 33028
Telephone Number 286 623 7235
Animal Name Sheeba
Animal ID# Date of adoption rescue 4 10 2025.
Date of adoption rescue
Chronological History Timeline:
Date: 4/9 20 25
Cat appeared extremely shing, full of
tesions and a gaping wound on
the neck.
Tried to trap, but did not succeed.
Date: 4/10 20 25.
was able to trap the cat.
Made an appointment with DPC.
Date: 411 2025.
DPC suggested to first check SNAD. He had to he sedated since he is very feral. SNAP came
had negative then they deened the would
and found 2 puncture upunds that needed to
be stitched. That was an additional \$ 440. He received antibiotics, topical meds, and
He received annibiotics, topical meas, and
2 other meds. Date:
Date:
doing well and I don't anticipate
additional costs

Please attach additional pages if needed.

AFFIDAVIT Please Have Notarized

NAME: Monique Logtenber	9 0 1 0 0 0
Address: 461 NW 162	The tembrate Pines 33028.
Telephone Number: 786 623	7235.
Animal Name Sheeba.	
Animal ID#	
Date of adoption:	
	ny money from a 3 rd party for the above
animal veterinary care.	
Monique Log terberg Print Name:	Signature:
State of Florida	
County of Broward	
The foregoing instrument was acknowledged before me	by means of ☑ physical presence or ☐ online
notarization, this 14 th day of <u>April</u>	, 20 20 by Monique S. Logtenberg
who is personally known to me or who has produced	
Signature of Notarial Officer:	
Notary Stamp or Name Typed/Printed:	
The same of the sa	RACHEL MONTADA Notary Public State of Florida Comm# HH255476 Expires 4/20/2026
My Commission Expires: 4/20/2026	
Serial Number (if any):	
	d' gin
Seal, if applicable)	
,	



DPC Veterinary Hospital

6991 Stirling Road Davie, FL 33314 (954) 989-9879

MONIQUE LOGTENBERG 461 NW 162ND AVE HOLLYWOOD, FL 33028

Client ID: 61394 Invoice #: 380237

Date: 4/11/2025

Patient ID: 1	66947 Species: F	Feline Weigh	Weight: 10.58 pounds		
Patient Name: S	HEEBA Breed: S	Breed: Shorthair, Domestic Birthday		Birthday: 04/10/2022 Sex: Neutered Male	
	Description	Staff Name	Quantity	Total	
4/11/2025	Comprehensive Exam	Dr. TIMOTHY COURTNEY	1.00	\$77.00	
	Feral Fe v/FIV/HW Triple Test		1.00	\$54.60	
	Abscess w/ Drain Group		1.00	\$0.00	
	Surgical Procedure Per Minute		15.00	\$327.00	
	Cold Sterilization w/ suture material		1.00	\$55.70	
	Gas Anesthesia		1.00	\$113.00	
	Zorbium (Bup)Topical Solution 6.6-1	16.5lb	1.00	\$36.74	
	Onsior Injection (per ml)		0.50	\$44.76	
	Convenia Injection (Per ml)		0.50	\$55.50	
	Bravecto Plus Fel Topical 6.2-13.8lb	os	1.00	\$66.29	
	Gabapentin 50mg/ml suspension		30.00	\$23.45	
	Carol was your receptionist today!		1.00	\$0.00	
		Patient	Subtotal:	\$854.04	

Instructions

We know you strive to give your furry friends the best but sometimes it's a challenge. That's why we are thrilled to announce Petly Wellness Plans are here!

Select and customize an annual preventive care plan, tailored to your pet. Spread out payments over each month, instead of paying in lump sums once or twice a year.

Regular checkups, routine testing and recommended vaccinations are all ways we keep your pet in tip-top shape! And with a Petly Wellness Plan, it's never been easier or more affordable to provide it all.

Ask about a Petly Wellness Plan for your pet today.

IF THE DOCTOR WANT\$ A FOLLOW UP ON YOUR PET TO ENSURE THAT THE ILLNESS HAS RESOLVED. THIS FOLLOW UP EXAM IS OFFERED AT A DISCOUNTED PRICE OF \$58.00 WITHIN THIRTY DAYS OF PREVIOUS APPOINTMENT, OTHERWISE THE CHARGE WILL BE \$77.00



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MONIQUE LOGTENBERG 461 NW 162ND AVE HOLLYWOOD, FL 33028

Client ID: 61394 Invoice #: 380237

Date: 4/11/2025

Instructions

1) Food-Water: Offer small portion of food, if pet keeps food down for 1/2 hour offer the rest of the pets normal portion. Water should be available at all times. If pet doesn't eat by the morning after surgery notify the clinic.

2) Exercise: We realize it may be difficult to restrict exercise, however you should discourage jumping and vigorous activity for a period of 1 week after surgery.

3) Anesthetic: Each animal recovers from anesthesia at a different rate. Some animals are back to normal within 24 hours, while others take as long as 3 to 4 days to fully recuperate.

4) Bleeding: Sometimes a small amount of bleeding may occur at the incision site. This happens because of blood "pooling" underneath the skin. A few drops of blood followed by cessation is normal. Please call the hospital if the bleeding persists.

5) Licking the Incision: Animals will often lick the incision site due to itching caused by being closely shaven. Excessive licking can create problems. If your animal is licking the area excessively, please call the hospital.

6) Sutures: The sutures need to be removed in 10-14 days

7) Please notify the clinic if any of the following develop:

1. Vomiting after 24 hours

2. Diarrhea

3. Refusal to eat after 12 hours

4. Severe pain

5. Continuous licking or pulling at the sutures.

6. There is a change in your pets general health or behavior

7. Redness, swelling discharge at the incision site.

8) No bathing or swimming for 10 days

\$854.04	Invoice Total:
\$854.04	Total:
\$854.04	Invoice Balance Due:
(\$440.84)	American Express:
(\$440.84)	Less Payment:
\$413.20	Invoice Balance Due:
\$0.00	Balance Due:

DPC Veterinary Hospital 6991 Stirling Road Davie, FL 33314 (954) 989-9879

Payment On Account

Reprinted on: 4/15/2025

MONIQUE LOGTENBERG 461 NW 162ND AVE HOLLYWOOD, FL 33028 Client ID: 61394

American Express, :

(\$413.20)

Change Given:

Total:

(\$413.20)

DPC DPC Hospital

6991 Stirling Road
Davie, Florida 33314
P (954)989-9879 F (954)989-8660

salance paid in Full Pallog PM

Thank You!

Current 30 Days

60 Days

90 Days

\$0.00

\$0.00

\$0.00

\$0.00



DPC Veterinary Hospital

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