

## Red Dog Project DOG SUPPLY LIST

Date: \_\_\_\_\_ DOG NAME: \_\_\_\_\_

FIRST ASSIGNED HANDLER: \_\_\_\_\_

Check the bag for the following items (check off what is inside the bag, please add quantity next to line item if more than one) THIS SHEET MUST STAY IN THE DOG'S BAG:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Duffle Bag      | <input type="checkbox"/> Harness - Dress | <input type="checkbox"/> Stuffed Toy     |
| <input type="checkbox"/> Back Pack       | <input type="checkbox"/> Bully Stick     | <input type="checkbox"/> Ball            |
| <input type="checkbox"/> Blanket         | <input type="checkbox"/> Kong            | <input type="checkbox"/> Squeaker Toy    |
| <input type="checkbox"/> Water Bowl      | <input type="checkbox"/> Nyla Bone       | <input type="checkbox"/> Coconut Oil Rub |
| <input type="checkbox"/> Blue 6 ft Leash | <input type="checkbox"/> Marrow Bone     | <input type="checkbox"/> Shampoo         |
| <input type="checkbox"/> Harness - Daily | <input type="checkbox"/> Antler          | <input type="checkbox"/> Brush/Comb      |
| <input type="checkbox"/> Martingale      | <input type="checkbox"/> Regular Collar  | <input type="checkbox"/> ID Tag(s)       |

Supplements: \_\_\_\_\_

Medicine: \_\_\_\_\_

Other: \_\_\_\_\_

HANDLER PLEASE NOTE: When this dog leaves FOR ANY REASON please pack ALL the items listed above in the dog's duffle or backpack. Thank you.

\_\_\_\_\_  
Dog Days Adoption Event Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
York Representative

\_\_\_\_\_  
Date

List Anyone Who Has Had This Bag:

If Supplies are Missing Date & Initial:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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