

# THE \$20 FIX

## Spay or Neuter Your Pet for \$20 or Less

The \$20 Fix program offers a low-cost way to spay or neuter your pets (dogs and cats only) **if you live in Wake, Durham, or Orange County in North Carolina**

AND

- Your household income is twenty-thousand dollars (\$20,000) or less/year

OR

- You are in a public assistance program.

### How this program works:

- Fill out this application and place in a stamped business envelope.

**MAIL TO: THE \$20 FIX - AnimalKind**  
**P.O. Box 12568**  
**Raleigh, NC 27605**

If you need help filling out the application, call 919-870-1660 or email: [thefix@animalkind.org](mailto:thefix@animalkind.org).

- If your income qualifies, you will receive a spay/neuter voucher and a list of participating vets by mail, usually within two weeks after we receive your application. **You must use this voucher within 60 days of the issue date or apply again. Don't wait to call – many vets have waiting lists!**

If you own more than one pet, you can apply for up to 4 dogs and cats on each application.

Your co-pay amount (cost to you) is **\$15 for a cat, or \$20 for a dog**. This must be paid in cash to the veterinarian when you drop off your pet. If you cannot afford the co-pay, please explain below:

\_\_\_\_\_

\_\_\_\_\_

### YOUR INFORMATION – PLEASE PRINT CLEARLY

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone-day: \_\_\_\_\_ night: \_\_\_\_\_

E-mail: \_\_\_\_\_

What was your total household income last year:

- Employment income last year? \$ \_\_\_\_\_
- Income from other sources last year (SSI, child support, alimony, etc.): \$ \_\_\_\_\_

What are your total current monthly expenses: \$ \_\_\_\_\_  
 (mortgage/rent, utilities, groceries, clothing, etc.)

Do you receive: (check all that apply)

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Food Stamps     | <input type="checkbox"/> Medicaid                       | <input type="checkbox"/> Fed. Sup. Security Income (SSI)                |
| <input type="checkbox"/> Social Security | <input type="checkbox"/> Rental Assistance              | <input type="checkbox"/> Aid to Families with Dependent Children (AFDC) |
| <input type="checkbox"/> Fuel Assistance | <input type="checkbox"/> Unemployment                   | <input type="checkbox"/> Women, Infants, & Children (WIC)               |
| <input type="checkbox"/> Disability      | <input type="checkbox"/> Other (please describe): _____ |   |

Please list all household members, including yourself, who rely on the income you have listed above:

First Name/Age	Occupation	Full/Part Time?
1.		
2.		
3.		
4.		
5.		

- Type of home: (CHECK ONE)
- House       Apartment
- Trailer       Other: \_\_\_\_\_

### PET INFORMATION

Dog or Cat	Name	Sex	Breed	Weight <70lbs	Weight >70lbs

- Which pets are pregnant or in heat? \_\_\_\_\_

- Is your pet up-to-date on rabies shots? YES NO  
*If yes, you must bring the current rabies certificate to your appointment.  
 If not, we will give your pet a rabies shot, required by law.*

- Do you have access to a car to safely transport your pet?  
 YES NO (CIRCLE ONE)

- Where did you pick up this application?  
 (Be as specific as possible): \_\_\_\_\_

I understand that **THE \$20 FIX** is for low-income pet owners only. The information I have provided is true to the best of my knowledge. AnimalKind has the right to verify or ask for more information to prove that I qualify for this program.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Note: The information you have provided will be used only to find out if you qualify for this program and will not be sold or shared for mailing list purposes.

#### For office use only

Reviewer	Date	Approved	Denied
Referred to			
Issue Date	Voucher #	Expires	