



# DRIVER CHECK LIST

Dog Name \_\_\_\_\_

Breed \_\_\_\_\_ Sex \_\_\_\_\_

Neutered \_\_\_\_\_ or Spayed \_\_\_\_\_ UTD on Shots \_\_\_\_\_

Health \_\_\_\_\_

Housebroken \_\_\_\_\_ Gets along with other animals \_\_\_\_\_

Is crate optional or mandatory? \_\_\_\_\_ Do drivers need to provide crate? \_\_\_\_\_

Special needs or comments \_\_\_\_\_

Name of CUR Coordinator \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

Name of Transporter you are picking up from \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

Name of Transporter you are handing off to \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

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