

New Jersey State Department of Health and Senior Services  
Infectious and Zoonotic Disease Program  
PO Box 369  
Trenton, New Jersey 08625-0360

FOR STATE USE ONLY	
Check #	Amount
Date of check	
Trans. Number	
Date of Trans.	

**Monthly Dog License Report**

**A: IDENTIFICATION**

Municipality : FREDON TOWNSHIP

County: SUSSEX

Date: 5/15/2023

**B: LICENSE DATA**

1. Period Covered	From: 04/01/2023	To: 04/30/2023
2. First License # of this report .....	615	
3. Last License # of this report .....	659	
4. Last License # of last report .....	614	
5. Total Licenses issued this report ....	44	

**C: LICENSES ISSUED FOR WHICH NO MONEY IS SUBMITTED**

List individually all licenses issued for which no fee is submitted.

Replace License # 75 [629]; Replace License # 637 [648]; Hearing Ear Dog License# 652 [652]

**D: PILOT CLINIC FUND**

Surcharge for all licenses issued except for seeing eye & hearing ear .

Numbers: 41                      Amount : \$8.20

**E: ANIMAL POPULATION CONTROL FUND**

Additional surcharge for licenses issued for non-spayed & non-neutered dogs except for seeing eye and hearing ear.

Number: 9                                      Amount: \$27.00

**F: FEE DATA**

1. Total licenses reported with registration fee :	\$41.00
2. Total Amount due for pilot clinic fund ( sec. D) :	\$8.20
3. Total Amount due for Animal population control fund ( sec. E) :	\$27.00
4. Total Amount due for this report :	\$76.20

**G: CERTIFICATION**

I certify this report is a true and complete statement of licenses issued during the period indicated above.

Officer Name :

Title :

Signature :

Date:

Phone : 973-383-7025