



PO Box 355
Mitchell SD 57301
605-770-2170

*Saving Lives,
One Paw At a Time*

mitchellanimalrescue.org
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SNIP Application

Application for SNIP Program – Contact Kathie Tupper at 999-2524 for information or mail to P O Box 355.

Applicant's Name: _____

Address: _____ Phone: _____

City and State: _____ Zip Code _____

Employment Full Time Part Time Disability Other

No. of Family Members _____

Gross Income Savings/CDs Total Income & Savings

Income Guidelines:

Family Size	185% of Poverty Level	Savings - \$3500.00 for one person plus \$250.00 for each additional family member.
1.....	\$20,035	
2.....	\$26,954	
3.....	\$33,873	
4.....	\$40,792	
5.....	\$47,711	
6.....	\$54,630	
7.....	\$61,549	
8.....	\$68,468	

**You must provide verification of income and savings for approval.
We will not copy or keep that information, it is just for verification.**

DOG

CAT

Breed: _____ Sex: _____ Male _____ Female
Sex: _____ Male _____ Female If female, has she had a litter? _____
Appr. Weight _____ Age _____ Age _____

Voucher Prices – Cost and tax amounts over the voucher amount are your responsibility

	Female Spay	Male Neuter
Cat	\$70.00	\$38.50
Dog	\$88.50	\$62.50

Where did you get the animal? Bought _____ Price \$ _____ Found _____

Adopted _____ Inherited _____ Pet Shop _____ Shelter _____

Relative _____ Breeder _____ Stray _____ Other _____