



Operation Catnip Raleigh
P.O. Box 90744
Raleigh, NC 27675
www.ocraleigh.org

Application for free or subsidized vouchers

Please be aware:

- In order for a free or subsidized voucher to be issued, we must have donated vouchers available. Feel free to email vouchers@ocraleigh.org to inquire if a donated voucher is available for issue. Depending on your income, you may qualify for a free voucher (total household income at or below \$30,000/year) or a subsidized voucher (\$25 co-pay for a total household income of \$30,001 to \$40,000).
- Proof of income is required. See below. You may also qualify if you receive Medicaid or Food Stamps.
- Mail proof of income and this application to Operation Catnip, Raleigh PO Box 1384 Cary, NC 27512
- You may mail proof of income and co-pay in the same envelope.
- If you choose, you may email your application and proof of income to vouchers@ocraleigh.org Please put Voucher Application in the subject line.
- Vouchers will be emailed to the address listed on this application unless you prefer the voucher to be sent by USPS.

Name: _____

Address: _____

City: _____ State: _____ Zip _____

Daytime Phone: _____ Evening Phone: _____

E-mail: _____

Number of Adults in Household: _____ Number of Children in Your Household: _____

Important Note About Privacy: *The information you provide will be used only for determining eligibility and will not be used for any other purposes. For additional protection of your private information, please mark through the Social Security or Medicaid numbers on all copies of documents.*

What photocopied documents are you enclosing with your application for proof of eligibility?

- Adult Medicaid Card
- Food Stamps Card
- Copy of Page 1 of Income Tax Return for each adult in your household
(only needed if you don't have Medicaid or Food Stamps card)

What is your CURRENT annual household income from ALL sources (before taxes)? \$ _____

Note about income: *If you think you qualify based on your current income, but did not file taxes, your income has decreased since your last income tax return, are unemployed or prefer not to send your tax return, please enclose a letter of explanation and your best proof of eligibility (W-2, check stubs, etc.)*

I understand that Operation Catnip Vouchers are for unowned feral and community cats. This does not include cats that I intend to keep or adopt to another person. I understand that this voucher may not be given to another person to use without prior permission from Operation Catnip. I understand that non-compliance with any of the above will result in refusal of Operation Catnip services and I will not receive a refund (if subsidized). Fraudulent use of Operation Catnip Vouchers will further result in refusal of future services from our voucher program as well as our monthly clinic.

The information I have provided about myself and my income is accurate and truthful. I have enclosed a copy of my Medicaid or Food Stamps card, or the best proof I have of my household income from all sources.

Signature: _____ Date: _____