

# Arkansas Dog Bill of Sale Form

State of Arkansas

DATE: \_\_\_\_\_

This Bill of Sale is made on the \_\_\_\_\_ day of \_\_\_\_\_, 20, by and between:

## 1. Seller Information:

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

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

City/State/ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

## 2. Buyer Information:

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

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

City/State/ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

## 3. Dog/Puppy Information:

The Seller agrees to sell, and the Buyer agrees to purchase, the following described dog/puppy:

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

Breed: \_\_\_\_\_

Color: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Sex: (Check one)

- Male
- Female

Registration #: \_\_\_\_\_

Microchip #: \_\_\_\_\_

Health Conditions: \_\_\_\_\_

#### 4. Purchase Price:

The Buyer agrees to purchase the dog/puppy for \$\_\_\_\_\_ (\_\_\_\_\_ Dollars). This amount is to be paid in full at the time of sale.

Payment Method: (Check one)

- Personal check
- Cashier's check
- Money order
- Cash
- PayPal
- Other: \_\_\_\_\_

#### 5. Terms of Sale:

The Buyer and Seller agree that the sale of the dog/puppy is final and that the dog/puppy is sold "as is" without any guarantees or warranties, either expressed or implied.

#### 6. Health Guarantee:

The Seller guarantees that the dog/puppy is in good health and has received all necessary vaccinations up to the date of sale. A health record will be provided to the Buyer.

**7. Return Policy:**

The Buyer may return the dog/puppy to the Seller within \_\_\_\_\_ days for a full refund if a veterinarian finds any health issues that were present before the sale date.

**8. Transfer of Ownership:**

The Seller agrees to transfer all necessary documentation, including registration papers and health records, to the Buyer at the time of sale.

**9. Governing Law:**

This Bill of Sale is governed by the laws of the State of Arkansas.

**10. Signatures:**

Seller's Signature: \_\_\_\_\_

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

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

Buyer's Signature: \_\_\_\_\_

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

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

**11. Notary Acknowledgement:**

State of \_\_\_\_\_

County of \_\_\_\_\_

This instrument was acknowledged before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20, by \_\_\_\_\_ (Seller) and \_\_\_\_\_ (Buyer).

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

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

Commission Expiration Date: \_\_\_\_\_