

# Louisiana Animal Bill of Sale Form

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

<b>Seller Information:</b>  <b>Full Name:</b> <b>Address:</b> <b>City/State/ZIP:</b> <b>Phone Number:</b> <b>Email:</b>	<b>Buyer Information:</b>  <b>Full Name:</b> <b>Address:</b> <b>City/State/ZIP:</b> <b>Phone Number:</b> <b>Email:</b>
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## Animal Description:

Animal ID	Species	Breed	Color	Age	Sex	Weight	Health Status & Vaccinations

## Terms of Sale:

- Acknowledgment of Sale:** The undersigned Seller certifies that the animal(s) described above are free of any liens or encumbrances and that they have full authority to sell the said animal(s).
- As-Is Condition:** The animal(s) are sold "as-is," with no warranties, either express or implied, regarding the condition or health of the animal(s).
- Inspection:** The Buyer acknowledges that they have inspected the animal(s) and accept them in their current condition.

4. **Transfer of Ownership:** The Seller agrees to transfer all rights, title, and interest in the animal(s) to the Buyer upon receipt of the full purchase price.
5. **Health Records:** The Seller certifies that the health records and vaccination status of the animal(s) are accurate to the best of their knowledge.

**Purchase Price:**

- **Total Amount:** \$ \_\_\_\_\_

**Payment Method: (Check one)**

- **Cash**
- **Check**
- **Money Order**
- **Bank Transfer**
- **Other:** \_\_\_\_\_

**Signatures:**

I, the undersigned Seller, hereby certify that I am the lawful owner of the animal(s) described above and that I have full authority to sell them. The information provided is true and correct to the best of my knowledge.

**Signature of Seller:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name of Seller:** \_\_\_\_\_

I, the undersigned Buyer, acknowledge that I have received and examined the animal(s) described above. I accept them in their current condition.

**Signature of Buyer:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name of Buyer:** \_\_\_\_\_

**Witnesses:**

1. **Witness Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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

2. **Witness Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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