Massachusetts Dog Bill of Sale Form

| This Bill of Sale is made on the day of | , 20, for the purchase |
|---|------------------------|
| and sale of a dog/puppy described as follows: | |
| 1. SELLER'S INFORMATION: | |
| • Name: | |
| Address: | |
| City, State, Zip Code: | |
| Telephone Number: | |
| Email Address: | |
| 2. BUYER'S INFORMATION: | |
| Name: | |
| Address: | |
| City, State, Zip Code: | |
| Telephone Number: | |
| Email Address: | |
| 3. DOG/PUPPY DESCRIPTION: | |
| Name: | |
| • Breed: | |
| Color: | |
| Gender: | |
| Date of Birth: | |
| Registration Number: | |
| Microchip Number: | |
| Vaccination Status: | |

| 4. PURCHASE PRICE: The Seller ag | rees to sell, and the Buyer agrees to buy, the | |
|---|--|--|
| dog/puppy described above for the | amount of \$ | |
| (U.S. Dollars | s). | |
| 5. PAYMENT METHOD: Payment wil | I be made by: | |
| ☐ Cash | | |
| ☐ Check (Check Number: |) | |
| ☐ Money Order | | |
| □ Bank Transfer | | |
| ☐ Other: | | |
| 6. HEALTH GUARANTEE: The Seller | r certifies that the dog/puppy is in good health | |
| | the necessary vaccinations and treatments. A | |
| health certificate issued by a license | ed veterinarian is provided with this Bill of | |
| Sale. | | |
| 7. RETURN POLICY: If the Buyer is | not satisfied with the health condition of the | |
| dog/puppy, they may return it within | n days for a full refund, provided that the | |
| dog/puppy is returned in the same of | condition as at the time of sale. | |
| 8. ADDITIONAL TERMS: The Buyer | agrees to the following terms and conditions: | |
| The Buyer will provide a safe | and loving home for the dog/puppy. | |
| The Buyer will ensure the dog/puppy receives proper veterinary care and | | |
| vaccinations. | | |
| The Buyer will not engage in | breeding or resale of the dog/puppy without | |
| the Seller's consent. | | |
| 9. SIGNATURES: This Bill of Sale is | agreed upon by the Seller and the Buyer. | |
| Seller's Signature: | Date: | |
| Buver's Signature: | Date: | |

| Witness 1: | | |
|------------|-------------|--|
| Signature: | Date: | |
| Witness 2: | | |
| Signature: | Date: | |