# How to Complete Your California Pet Care Designation

Pet Care Designation (California)

**INSTRUCTIONS — KEEP FOR YOUR RECORDS. DO NOT ATTACH THIS PAGE TO YOUR DOCUMENT.**

**About this form.** This form names who will take care of your pets if you die or cannot care for them, with instructions for their care.

1. **Name a caregiver and describe your pets (Page 1)**
   Talk with your caregiver first.
2. **Sign before a notary**
   Bring a current, government-issued photo ID.

## After It's Signed

- Give copies to your caregiver and veterinarian. For larger funds, ask about a pet trust.

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**California-Commissioned Notaries**

SCAN TO BOOK

**Questions about this document? Talk to an attorney.** Gavrilov & Brooks Law Firm has attorneys licensed in California, Nevada, and other states. Phone and video consultations are available. **(916) 504-0529** · **www.gavrilovlaw.com**

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YOUR FORM BEGINS ON THE NEXT PAGE

# PET CARE DESIGNATION

California

Pet owner

Address

If I die, become incapacitated, or cannot care for my pet(s), I designate:

Caregiver

Address

Telephone

Alternate caregiver

Address

Telephone

**My pets:**

Name, species, breed, age, microchip number

**Care instructions (veterinarian, diet, medications, routines):**

Funds for care (amount or source, optional)

I authorize the caregiver to take possession of my pet(s), obtain veterinary records and care, and make care decisions. This designation does not transfer other property.

Owner's initials: _____



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Date

X

Pet owner

Printed name

## CALIFORNIA ACKNOWLEDGMENT

**STATE OF CALIFORNIA** )
)
**COUNTY OF** ) **ss.**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

On (date)

before me, (insert name and title of the officer)

personally appeared

name(s) of pet owner

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal.

X

Notary Public

(Notary seal)

Notary's printed name

Title (Notary Public, State of California)

My commission expires



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