

Pet Guardianship

I / We, _____ give,
devise, and bequeath the following to my surviving spouse;

_____. In the event that both of us die or
are incapacitated then we leave the following to any surviving child or children:

_____.

In the event that we do not have any surviving child/children we name the following as guardian
of our pets: The named person(s) is un-aware that we are appointing them as guardian(s) of your
pet(s):

Name: _____

Pet Name: _____ / _____

Pet Name: _____ / _____

Pet Name: _____ / _____

Pet Name: _____ / _____

If they are unable or unwilling to accept my animals,
I give such animals to the following with the request that they treat them as companion animals.

If the named individual or individuals are unable or unwilling to accept my animals, my
Executor shall select an appropriate person to accept the animals and treat them as companion
animals, and I give my animals to such person.

I direct my Executor to give \$ _____ from my estate to the person who accepts my
animals, and I request (but do not direct) that these funds be used for the care of my animals.

The Executor of my will:

Name _____ Phone _____

Address _____

Pet Owner Printed Name

Signature/Date

Pet Owner Printed Name

Signature/Date

I, _____, the testator, sign my name to this will, consisting of _____ pages this day of _____, _____.

Being duly sworn, I declare to the undersigned authority that I sign this document as my last will, that I sign it willingly, and that I execute it as my free and voluntary act for the purposes therein expressed. I declare that I am of the age and majority or otherwise legally empowered to make a will, and under no constraint or undue influence.

Name date

I, _____, the testator, sign my name to this will, consisting of _____ pages this day of _____, _____.

I, _____, the testator, sign my name to this will, consisting of _____ pages this day of _____, _____.

Being duly sworn, I declare to the undersigned authority that I sign this document as my last will, that I sign it willingly, and that I execute it as my free and voluntary act for the purposes therein expressed. I declare that I am of the age and majority or otherwise legally empowered to make a will, and under no constraint or undue influence.

Name date

*FOR NOTARY PUBLIC *

THE STATE OF _____, COUNTRY OF _____

Subscribed, sworn to and acknowledged before me by

SIGNED: _____

Office Capacity of Officer