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# Pet Medication Log

## To be completed by the client:

Client's name: \_\_\_\_\_

Name of pet/s to receive medication: \_\_\_\_\_

Name of medication/where medicine is kept: \_\_\_\_\_

Dosage instructions: \_\_\_\_\_

*\*Please note if you have a multiple pet household, a special indicator (unique color collar, etc. should be placed on the pet that should receive medication.) Please list the unique identifier here:*

Client signature: \_\_\_\_\_

## To be completed by sitter:

Date	Time	Sitter's Name	Medication	Dosage	Notes

