



UNITED STATES MARINE CORPS
PROVOST MARSHAL'S OFFICE
MARINE AIR GROUND TASK FORCE TRAINING COMMAND
MARINE CORPS AIR GROUND COMBAT CENTER
BOX 788200
TWENTYNINE PALMS, CA 92278-8200

IN REPLY REFER TO:
1630
11A

From: _____, Owner of Pet
To: Provost Marshal's Office
Subj: PET REGISTRATION SWORN STATEMENT
Ref: (a) CCO 1630.6_

1. I, _____, make this sworn statement that I am the legal and rightful owner of the pet(s) being registered aboard Marine Corps Air Ground Combat Center, Twentynine Palms, California.

2. The pet(s) being registered is/are:

Type (e.g. dog/cat): _____

Breed/Species: _____

Color: _____

Sex: _____

Registered Tag#: _____

Rabies Vaccination Date: _____

3. My signature on this form certifies that I will comply with the guidance written under chapter 6 of the CCO 1630.6_, Marine Corps regulations, local regulations and state laws on ownership and registration requirements.

4. My signature on this form further certifies that I am the legal owner of the pet(s) listed.

Registrant Signature