

State of:

Limited Power of Attorney / Lien Certification

County Of:	
I, Registered Owner: (enter name exactly as listed on the title) of Registered Owner address, city, state and zip:	
Vehicle Identification Number:	License Plate Number:
Year/Make/Model:	Vehicle Color:
Name of Registered Owner:	Drivers License Number:
Odometer Reading:	
I certify to the best of my knowledge that the oct the following statements is checked:	lometer reading is the actual mileage of the vehicle unless one of
The amount of the mileage stated is in excess	of its mechanical limits.
The odometer reading is not the actual milea	ge.
(WARNING - ODOMETER DISCREPANCY)	
Signature of R	Registered Owner (X)
C	ONLY ONE SIGNATURE PER FORM
State of County of undersigned Notary Public, for the state of _	Sworn to and subscribed before me, the on the Day of is personally known to me or satisfactorily proved to me to he within instrument. Given under my hand and seal this
20 by who i be the person whose name is subscribed to the day of 20 Signature	s personally known to me or satisfactorily proved to me to he within instrument. Given under my hand and seal this Commission expire date
(Notary)	(Seal)