Mississippi

Department of Revenue MOTOR VEHICLE SERVICES P.O Box 1383 Jackson, MS 39215-1383 POWER OF ATTORNEY TO TRANSFER MOTOR VEHICLE

This document shall pass with the certificate of title and be included as a support document to application for new certificate of title and/or application for replacement certificate of title.

THE STATE OF MISSISSIPPI

COUNTY OF	KNOW ALL MEN BY THESE PRESENT	Ī:	
THAT I,			
GRANTOR, NAME	TO APPEAR IN SAME FORM AS CONTAINED IN CERTIFICATE OF TITLE		
(ADDRES	, OF T	HE COUNTY OF	
	and the STATE OF MISSIS	SSIPPI, owner of	
the following described motor vehicle, have ma	ade, constituted and appointed and by these present do make, constitut	e and appoint	
IF NAME IS LICENSED D	DEALER, THEN ALSO INCLUDE NAME OF DEALER AUTHORIZED REPRESENTATIVE		
	, OF THE COUNT	TY OF	
(ADDRESS)	, 5:		
	and the STATE OF MISSI	SSIPPI, my true	
and lawful attorney, for me and in my name, pl	lace and stead to sell, transfer and assign the motor vehicle described a	s follows to wit:	
MAKE	V.I.N		
YEAR	BODY TYPE		
TITLE NUMBER			
THE NOMBER			
	power and authority to do and perform all and every act requisite and ne to anyone whomever, as may be designated by said attorney.	cessary to transfer	
FEDERAL and STATE LAW requires that you providing a false statement may result in fines	state the mileage in connection with the transfer of ownership. Failure to and/or imprisonment.	o complete or	
I certify to the best of my knowledge that the or is checked.	dometer reading is the actual mileage of the vehicle unless one of the fo	llowing statements	
	I hereby certify that the mileage state is in excess of the mechanical lim	nits of	
Odometer Reading (No Tenths)2.	the odometer. The odometer reading is not actual mileage. WARNING-ODOMETER	DISCREPANCY	
IN WITNESS WHEREOF I HAVE hereunto s	set my hand thisday of	, 20	
	Signature of Owner, Grantor	Signature of Owner, Grantor	
-	Printed Name of Grantor (if Title is in Company Name, include appropriate Title, Partner, President, S	Sec. Treas., etc.)	
Before me, the undersigned authority, on this	s day personally appeared(Individual Name Only)		
· ·	subscribed to the above foregoing instrument, and acknowledge to me	that he executed	
the same for the purposes and consideration the	herein expressed.		
GIVEN UNDER MY HAND AND SEAL OF O	DFFICE THISday ofA	D., 20	
	Notary Public	Notary Public	