

# POWER OF ATTORNEY FORM

I, \_\_\_\_\_ HEREBY APPOINT \_\_\_\_\_  
OF \_\_\_\_\_ AS MY ATTORNEY-IN-FACT TO ACT AS I WOULD AND DO  
ANYTHING IN MY BEHALF, IN MY ABSENCE, TO TRANSFER MY VEHICLE WHICH IS A  
\_\_\_\_\_ WITH VEHICLE IDENTIFICATION NUMBER (VIN) OF  
\_\_\_\_\_  
WHICH INCLUDES, SIGNING ANY DOCUMENTS AND THE RETURN OF MY TITLE.

THIS POWER OF ATTORNEY SHALL NOT BE AFFECTED BY MY INCAPACITY BUT WILL  
TERMINATE UPON MY DEATH UNLESS I HAVE REVOKED IT PRIOR TO M Y DEATH.  
I INTEND BY THIS POWER OF ATTORNEY TO AVOID A COURT SUPERVISED GUARDIANSHIP  
OR CONSERVATORSHIP.

SHOULD MY ATTEMPT BE DEFEATED, I ASK THAT MY AGENT BE APPOINTED AS GUARDIAN  
OR CONSERVATOR OF MY PERSON OR ESTATE.

\_\_\_\_\_  
OWNER SIGNATURE

\_\_\_\_\_  
DATE

PERSONAL IDENTIFICATION REQUIRED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Subscribed And Sworn To Before Me This \_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Notary Public For The State Of \_\_\_\_\_

County Of \_\_\_\_\_

My Commission Expires \_\_\_\_\_