



**BILL OF SALE**

Vehicle Identification Number		Year	Make	Body Style	
Sale Date	Sale Payment Amount				
Buyer Name (first, middle, last, suffix)		Driver License Number		Date of Birth	
Mailing Address		City		State	Zip

I do hereby sell and transfer ownership of the vehicle above to the Buyer in consideration of Sale Payment Amount.

Seller Name (first, middle, last, suffix)		Driver License Number		Date of Birth	
Mailing Address		City		State	Zip
Signature					

Acknowledged before me this date.		Notary or MVD Agent Signature			
Date	County	State	Commission Expires		