

BILL OF SALE

Vehicle Identification Number		Y	′ear	Make	Body Style
Sale Date	Sale Payment Amount \$				
Buyer Name (first, middle, last, s	uffix)			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	Date		

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