POWER OF ATTORNEY

Date:		<u> </u>		
I/We				, hereby name and
		Name		
appoint			to be m	y/our lawful attorney and to act
	Name			
for me/us to apply for cert	tificate of	title or reg	istration.	
Year	Make			
Vehicle Identification Nu	mber			
	X			
Print Owners Name	_ 11	Sig	gnature of Owner	Date
Print Owners Name	_ x	Signature of Owner		Date
Address		City/State	Zip	Telephone #
The signature of				was subscribed and
sworn to before me at			NH county of	
on this the	_ day of			in the year of
			Notary/Justice of	the Peace
			Signed	
			My commission e	

THIS FORM MUST BE NOTARIZED

Note: Please sign name(s) as they appear on the title.