



A Public Service Agency

POWER OF ATTORNEY

VEHICLE/VESSEL DESCRIPTION

IDENTIFICATION NUMBER	YEAR MODEL	MAKE	LICENSE PLATE/CF #	MOTORCYCLE ENGINE #

I, _____
PRINT NAME

I, _____
PRINT NAME

appoint:

PRINT NAME

as my attorney in fact, to complete all necessary documents, as needed, to transfer ownership as required by law.

ALL SIGNATURES MUST BE IN INK

I certify under penalty of perjury under the laws of the State of California that the information I have provided is true and correct.

SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY CITY STATE ZIP CODE DATE DL, ID, OR DEALER #

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