



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 (or declare) under penalty of perjury under the laws of the State of California that the foregoing 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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