BILL OF SALE OF AUTOMOBILE To be completed upon sale of motor vehicle.					
State of Michigan County of			\$		
FOR AND IN CONSIDERATI hand, paid me this day in fu following personal property	ON OF ull by, "Seller(s)"do	Dollars (\$, Dollars (\$, (Bu , (Bu b hereby bargain and s) cash in uyer(s), sell to Buyer(s) the		
One (1) Motor Vehicle Make	Model	Body Type			
Vehicle Identification Number (V	 /IN)				
The said property I guarantee is my own and free of all claims and offsets of any and all kinds.					
To have and to hold the same unto Buyer(s) and Buyer(s) executors, administrators and assigns, forever. Seller(s) hereby covenant to and with Buyer(s)that Seller(s) is the true and lawful owner(s) of the above-described motor vehicle, that the same is free from all encumbrances whatsoever except (lienholder), that Seller(s) has good right to sell the same as aforesaid, and that Seller will warrant and defend the same against all lawful claims and demands whatsoever except the above lien, if any.					
		Seller(s)			
		Signature Print Name: Signature Print Name:			
SWORN TO AND SUBSCRIBED BEFORE ME, this the day of, 20_					
My Commission Expires:		NOTARY PUBLIC			

To be competed by Transferor (Seller)

			,		
Federal law (and State law, if applicable) requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/ or imprisonment.					
I,, state that the odometer now reads miles and to the best of my knowledge that it reflects the actual mileage of the vehicle described below, unless one of the following statements is checked.					
I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits.					
I hereby certify that the odometer reading is NOT the actual mileage. WARNING - ODOMETER DISCREPANCY.					
Make	Model	Body Type	Body Type		
Vehicle Identification Number (V	TN),		Year:		
Vehicle Identification Number (VIN) Year: Signature of Transferor (Seller):					
		's) Information			
Transferor's Name (Please Type	or Print):				
Street Address:	State	7			
City:	State:	Zip:			
Transferee's (Buyer's) Information					
Transferee's Name (Please Type or Print):					
Street Address:					
City:	State:	Zip:			
Signature of Transferee (Buyer):					
DATE OF STATEMENT:					
STATE OF MICHIGAN COUNTY OF					
SWORN TO AND SUBSCRIBED BEFORE ME, this the day of, 20					
My Commission Expires:					
ORIGINAL MUST BE PROVIDED WITH APPLICATION FOR A CERTIFICATE OF TITLE					