NOTICE

THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE (YOUR "AGENT") POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU.

THIS POWER OF ATTORNEY DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS, BUT WHEN POWERS ARE EXERCISED, YOUR AGENT MUST USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS POWER OF ATTORNEY.

YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME INCAPACITATED, UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THESE POWERS OR YOU REVOKE THESE POWERS OR A COURT ACTING ON YOUR BEHALF TERMINATES YOUR AGENT'S AUTHORITY

YOUR AGENT MUST KEEP YOUR FUNDS SEPARATE FROM YOUR AGENT'S FUNDS.

A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS YOUR AGENT IS NOT ACTING PROPERLY.

THE POWERS AND DUTIES OF AN AGENT UNDER A POWER OF ATTORNEY ARE EXPLAINED MORE FULLY IN 20 PA.C.S. CH. 56.

IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER OF YOUR OWN CHOOSING TO EXPLAIN IT TO YOU.

I HAVE READ OR HAD EXPLAINED TO ME THIS NOTICE AND I UNDERSTAND ITS CONTENTS.

Principal:

Date: _____, 20____

LIMITED POWER OF ATTORNEY FOR SALE OF MOTOR VEHICLE

To authorize another to sign bill of sale, title and other documents.

State of Pennsylvania County of _____

KNOW ALL PERSONS BY THESE PRESENTS, THAT I/We

Do all things necessary to sell or transfer the property described below, including, but limited to, execution of a bill of sale, title, odometer statement, request for release of liens, and other documents, and to receive all funds from the purchase of same.

Property is One (1) Motor Vehicle

M.L.	Model			
Make	WIGHT	Body Type		
Vehicle Identification Number (V	/IN)	Year:		
I hereby ratify and confirm all that said attorney-in-fact shall lawfully do or cause to be done by virtue of this Power of Attorney and the rights and powers herein granted.				
All acts done by means of this power shall be done in my name, and all instruments and documents executed by my Attorney hereunder shall contain my name, followed by that of my agent and the description "Agent-in-Fact", excepting however any situation where local practice differs from the procedure set forth herein, in that event local practice may be followed. This LIMITED POWER OF ATTORNEY shall be valid and may be relied upon by any third parties until such time as they receive notice of revocation of same.				
WITNESS my signature this the	day of, 2	0		
Signature		Signature		
I,		, have read the attached power of attorney		
and am the person identified as the	agent for the principal. I hereby	acknowledge that in the absence of a specific provision to		
the contrary in the power of attorned	ey or in 20 Pa.C.S. when I act as	agent:		
I shall exercise the powers for the b	enefit of the principal.			
I shall keep the assets of the princip	bal separate from my assets.			
I shall exercise reasonable caution a	and prudence.			
I shall keep a full and accurate reco	rd of all actions, receipts and dist	bursements on behalf of the principal.		
Agent:				
Date:				
STATE OF PENNSYLVANIA COUNTY OF				
On this, the	_ day of,	, before me		

, the undersigned officer, personally appeared , known to me (or satisfactorily proven) to be the person whose name subscribed to the within instrument, and acknowledged that (he/she/they) executed the same for the purposes therein contained.			
Given under my hand this	day of	, A. D. 20	
My Commission Expires:		NOTARY PUBLIC	