BILL OF SALE OF AUTOMOBILE To be completed upon sale of motor vehicle. State of New Hampshire County of __ FOR AND IN CONSIDERATION OF _____ Dollars (\$_____) cash in hand, paid me this day in full by______, (Buyer(s), _____, "Seller(s)"do hereby bargain and sell to Buyer(s) the following personal property: One (1) Motor Vehicle Make Model Body Type Vehicle Identification Number (VIN) Year: 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. This vehicle is sold "as-is" without any warranties, express or implied, as to the condition of such vehicle. By accepting this Bill of Sale, Buyer(s) represent that Buyer(s) have personally inspected the vehicle and accepts the vehicle "as-is". Seller(s) Signature Print Name: Signature Print Name: _____ SWORN TO AND SUBSCRIBED BEFORE ME, this the ____ day of _____, 20____, NOTARY PUBLIC My Commission Expires:

ODOMETER DISCLOSURE STATEMENT 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	9	of the vehicle described below, unless one of the
☐ I hereby certify that to the b excess of its mechanical limits.	est of my knowledge the odor	meter reading reflects the amount of mileage in
☐ I hereby certify that the odometer reading is NOT the actual mileage. WARNING - ODOMETER DISCREPANCY.		
Make	Model	Body Type
Vehicle Identification Number ((VIN)	Year:
Signature of Transferor (Seller):		
Transferor's (Seller's) Information Transferor's Name (Please Type or Print):		
Street Address:	5 OI FIIII().	
City:	State: Zi	p:
Transferee's (Buyer's) Information		
Transferee's Name (Please Type or Print):		
Street Address: City:	State: Zi	p:
Signature of Transferee (Buyer):		
DATE OF STATEMENT:		
STATE OF NEW HAMPSHIRE COUNTY OF		
SWORN TO AND SUBSCRIBED BEFORE ME, this the day of, 20		
NOTARY PUBLIC		
My Commission Expires:		
ORIGINAL MUST BE PROVIDED WITH APPLICATION FOR A CERTIFICATE OF TITLE		