

LIMITED POWER OF ATTORNEY FOR SALE OF MOTOR VEHICLE

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

State of Maryland

County of _____

KNOW ALL PERSONS BY THESE PRESENTS, THAT I/We _____, whose address is _____, _____ (City), _____ (State), _____ (Zip), desiring to execute a LIMITED POWER OF ATTORNEY, hereby appoint, _____, of _____ County, Arkansas, as my Attorney-in-Fact to act as follows, GRANTING unto my Attorney-in-Fact full power to:

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

Make

Model

Body Type

Vehicle Identification Number (VIN) _____

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 attorney and the description "Attorney-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 _____, 20____.

Signature

Signature

STATE OF MARYLAND

COUNTY OF _____

Personally appeared before me, a Notary Public, in and for said county and state, on this _____ day of _____, 20____ the within named _____ known to me, or satisfactorily proven, to be the person whose name is subscribed to the within instrument and who acknowledges that he/she/they (strike one) executed the same for the purposes therein contained.

NOTARY PUBLIC

Print Name: _____

My Commission Expires:

WITNESS ATTESTATION

The foregoing power of attorney was, on the date written above, published and declared by

(Name of Principal)

in our presence to be his/her power of attorney. We, in his/her presence and at his/her request, and in the presence of each other, have attested to the same and have signed our names as attesting witnesses.

Witness #1 Signature

Witness #1 Name Printed

Witness #1 Address

Witness #1 Telephone Number

Witness #2 Signature

Witness #2 Name Printed

Witness #2 Address

Witness #2 Telephone Number