847

STATE OF ALASKA DIVISION OF MOTOR VEHICLES

POWER OF ATTORNEY

ے لا	LICENSE PLATE NUMBER			SERIAL NUMBER (VIN)				
VEHICLE	YEAR	MAKE		MODEL		BODY STYLE	COLOR	
	NAME OF PERSON BEING APPOINTED TO ACT FOR OWNER							
APPOINTMENT INFORMATION	FULL FIRST NAME FULL M		FULL MIDD	_ MIDDLE NAME		LL LAST NAME	SUFFIX	
	The above named is hereby appoint the following person as my attorney-in-fact to sign any and all documents for the vehicle described above, including but not limited to: • Vehicle Purchase • Vehicle Sale • Application for Title and/or Registration • Transfer of Ownership							
	PRINTED NAME OF OWNER / COMPANY AGENT					LICENSE	E / ID NUMBER	
	SIGNATURE OF OWNER / COMPANY AGENT					DATE		
	COMPANY NAME (IF APPLICABLE)							
						ľ	(05.11)	
	Subscribed and Sworn to before me this day of, 20						(SEAL)	
)TARY								
	Commission Expiration: NOTE: A notary public or other officer completing this certificate verifies only the identity of the individual who attached, and not the truthfulness, accuracy, or validity of that document.					ndividual who signed the d	ocument, to which this certificate is	

This form must be completed in full in ink. Only the original, notarized document is acceptable.