



OHIO DEPARTMENT OF PUBLIC SAFETY  
BUREAU OF MOTOR VEHICLES

**POWER OF ATTORNEY**

***Know all men by these presents, that the undersigned does hereby make, constitute and appoint***

LAST NAME	FIRST NAME	MI	
STREET ADDRESS	CITY	STATE	ZIP CODE

My true and lawful attorney-in-fact for me and in my name, place and stead, to make and execute the assignment of or application for my Certificate of Title covering the following described motor vehicle, to-wit:

MAKE	YEAR	SERIAL NO.
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And granting to my said attorney-in-fact full authority to do and perform all and every act and thing whatsoever, requisite, necessary and proper to be done in and about the premises as fully and to all intents and purposes as the undersigned might or could do with full power of substitution and revocation hereby ratifying and confirming all that said attorney or his substitute shall lawfully do or cause to be done by virtue hereof.

In Witness whereof, the undersigned has caused his name to be subscribed hereto this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

SIGNATURE OF PERSON GIVING POWER OF ATTORNEY <b>X</b>	SOCIAL SECURITY NUMBER OF BUYER / OWNER
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**ACKNOWLEDGEMENT**

**Notary:**

Sworn to and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_ in \_\_\_\_\_ County,  
State of \_\_\_\_\_.

(Notary Seal)

Signature of Notary Public **X** \_\_\_\_\_ My commission expires \_\_\_\_\_