

# WISCONSIN MOTOR VEHICLE POWER OF ATTORNEY

Known by all persons by these presents, that \_\_\_\_\_ (the "Principal") with a mailing address of \_\_\_\_\_ grants to \_\_\_\_\_ (the "Agent") with a mailing address of \_\_\_\_\_ or its designated representative for an indefinite period of time or until canceled in writing, a limited power of attorney, to act on its/his/her behalf, with regard to all matters pertaining to the registering, licensing, transfer of ownership, and/or titling of the vehicle listed below with the applicable motor vehicle agency in the State of Wisconsin.

YEAR	MAKE	MODEL	VIN	ODOMETER

Principal's Date of Birth: \_\_\_\_\_ (mm/dd/yyyy)

Principal's Social Security Number (SSN): \_\_\_\_\_

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## NOTARY ACKNOWLEDGMENT

STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_ ss.

Before me personally appeared the above-named \_\_\_\_\_, (Principal) acting as Principal for the above-mentioned vehicle and duly acknowledged the foregoing instrument to be his/her free act and deed in his/her individual capacity or, if the representative of a company, acknowledges that he or she is duly authorized to sign the foregoing instrument on behalf of the company.

**NOTARY SIGNATURE:** \_\_\_\_\_

Print Name: \_\_\_\_\_ My Commission Expires: \_\_\_\_\_

(Seal)

