

MIKE FOLEY
CLERK OF COURTS
MONTGOMERY COUNTY, OHIO

POWER OF ATTORNEY

Erasures and alterations void this instrument.
This instrument void after sixty days from date herein.

Know All Men By These Presents, that I, the undersigned, do hereby make, constitute and appoint

Name: _____

Address: _____

My true and lawful attorney-in-fact for the following described motor vehicle, to-wit:

Make _____ Year _____ VIN _____

and I hereby grant 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 I might or could do with full power of revocation, hereby ratifying and confirming all that my named Attorney shall lawfully do or cause to be done by virtue hereof, and specifically I grant to my said Attorney-in-Fact full authority to make and execute:

() application for a duplicate title in my name for the above described vehicle.

Signature & Social Security # of person giving Power of Attorney

() application for a certificate of title in my name for the above described vehicle.

Signature & Social Security # of person giving Power of Attorney

() the assignment for transfer of title for the above described vehicle from my name to

Signature & Social Security # of person giving Power of Attorney

STATE OF OHIO, COUNTY OF MONTGOMERY, SS:

Before me, a Notary Public in and for said State, personally appeared _____ ,
the Grantor of this Power of Attorney, and acknowledged that he/she did sign the within instrument and that
the signing of same is of his/her own free act and deed.

In testimony Whereof, I have hereunto set my hand and affixed my notarial seal on this
_____ day of _____ , _____ .

Notary Public in and for _____
County, Ohio, My Commission Expires _____

(SEAL)