POWER OF ATTORNEY

| Date: | | | |
|----------------------------|----------------------|----------------------|---------------------------------|
| I/We | | | , hereby name and |
| | Nam | e | |
| appoint | | to be my | /our lawful attorney and to act |
| | Name | | |
| for me/us to apply for cer | tificate of title or | registration. | |
| Year | | Make | |
| Vehicle Identification Nu | mber | | |
| | X | | |
| Print Owners Name | | Signature of Owner | Date |
| Print Owners Name | X | Signature of Owner | Date |
| Address | City/Sta | te Zip | Telephone # |
| The signature of | | | was subscribed and |
| sworn to before me at | | NH county of | |
| on this the | _ day of | | in the year of |
| | | Notary/Justice of th | ne Peace |
| | | Signed | |
| | | | |
| | | | pires |

THIS FORM MUST BE NOTARIZED

Note: Please sign name(s) as they appear on the title.