ATV Bill of Sale Form #: BOS-18374

Transaction	Details			
State:	Wisconsin	County:		
Seller (furthe	r referred to as "Seller")			
Name:		Phone Number:		
Address:				
City, State, Zip	:			
Buyer (furthe	er referred to as "Buyer")			
Name:		Phone Number:	Phone Number:	
Address:				
City, State, Zip	:			
Vehicle Deta	ils			
Year:	Make:	Model:	Model:	
VIN:	I	Hours:	Mileage:	
Description:		I	L	
L "Seller" agr	ree to sell the above vehicle to th	e "Buyer" in exchange for \$	or	
., co, ag.			(date). I, "Seller",	
-		this vehicle and have full authority to vehicle has no current liens or other of	transfer ownership to the	
Seller Signature		Date		
	damages or liability resulting from	IS. I assume all responsibility and wil the use of the vehicle. I also agree,		
Buyer Signature		Date		
Sworn t	to and subscribed before me on t	his day of	, 20	
_				

Commission Exp Date

Notary Public Signature