## BILL OF SALE

|                      | Date Sold:   |  |
|----------------------|--|--|
| Seller's             | Buyer's  |  |
| Printed Name:        | Printed Name:  |  |
| Address:             | Address:   |  |
| City:                | City:  |  |
| State:Zip:           | State: Zip:  |  |
| Home Phone:          | Home Phone:  |  |
| Cell Phone:          | Cell Phone:  |  |
| Work:                | Work:  |  |
|                      |  |  |
| For The Sum of \$:   | Payment in form of:  |  |
|                      | VEAR OR AFFIRM THAT I THE SELLER OF THE AT THE INFORMATION PROVIDED IN THIS BILL OF THE BEST OF MY BELIEF. |  |
| Signature of Seller: | Date:  |  |
| Signature of Buyer;  | Date;  |  |

