Compassionate Care
CREDIT UNION

RECREATIONAL VEHICLE BILL OF SALE

INSTRUCTIONS:

- All areas must be completed in full.
- If no liens exist write the word "NONE."
- Any alterations or erasures will require additional verification.

Please print or type **Date:** _____

I, _____ in consideration of the payment of the sum of $_____
(Full Legal Name of Seller)
acknowledge receipt of payment from _____ and do hereby sell, transfer
(Full Legal Name of Buyer)
And deliver unto:

Full Legal Name of Buyer(s) _____ ☐ and
First Middle Last
☐ or
_____
First Middle Last

Address of Buyer: _____ _____ _____ _____
Street City State Zip

Buyer's Signature: _____ Buyer's Signature: _____

Type: ☐ Travel Trailer ☐ RV ☐ ATV ☐ UTV ☐ Snowmobile

Year: _____ Make: _____ Model: _____Mileage: _____

Vehicle Identification Number

Lienholder Information: _____

DISCLOSURE: The seller certifies the odometer of this vehicle is correct to their knowledge, and the seller has not modified the odometer, disconnected it, or rolled back the mileage during their ownership.

WARRANTY: The vehicle is sold 'AS IS," meaning there is no warranty for any defect and all repairs are the responsibility of the buyer.

Seller's Signature: _____ Date: _____
Seller's Signature: _____ Date: _____
Address of Seller: _____ _____ _____ _____
Street City State Zip