Request for Rescission of Sale

DATE:			
DEALER:		ADDRESS:	
		UBLIC SAFETY AND CORRE	CTIONS OFFICE OF MOTOR VEHICLES
FOR: RESCISSION	OF SALE, RETURN OF SALE	S TAX AND FEES	
LICENSE			
MAKE	MODEL	YEAR	
BODY	VIN		
BODI	* 11 4		
AGREEMENT, WE.	THE UNDERSIGNED, HEREI	BY REOUEST THAT THE OF	LE WAS RESCINDED BY MUTUAL FICE OF MOTOR VEHICLES RESCIND THE LE), PRSENTED OR ISSUED IN THE NAME OF
	GN ALL RIGHTS TO SAID RI AND FEES TO SAID DEALEI		AND FURTHER REQUEST THE RETURN OF
THE SALE WAS RE	CINDED FOR THE FOLLOW	ING REASON:	
Owner Signature			Co-Owner Signature
Owner Printed Name			Co-Owner Printed Name
AS TO PEACEFUL POSSESSION AND RESCISSION OF SALE			Dealer Representative
Witness Signature			Witness Printed Name
Witness Signature			Witness Printed Name
		AFFIDAVIT BY WITNESS	
WITNESS TO THIS	DOCUMENT AND THAT TH	E SIGNATURE OF THE OWN	DID DEPOSE AND SAY THAT HE/SHE IS A ER IS TRUE AND GENUINE AND AFFIXED SSES WHOSE NAMES ARE AFFIXED
Notary Public		Date	Witness
Notary Public Printe	d Name and ID# or Notary Stan	np	Witness Printed Name