Mississippi

AFFIDAVIT FOR REPOSSESSED MOTOR VEHICLE

THE STATE OF MISSISSIPP	PI, COUNTY OF			
CITY				
Name of Former Owner				
	Complete Na	me (Last, First, and Middle)		
Address:				
City,State,Zip:				
Title Number	Make	Model	Year	
Vehicle Identification Number	r(VIN)	_		
Lienholder			Date of Lien	
Address				
City	State Zip			
Date of Repossession				
	ersigned has repossessed the motor settlement of a Lien of Secur		ause of the failure of the former owner	
(Lienholder)		Signature of Lienholder	or Authorized Representative	
Subscribed and sworn	to before This this	day of	, 20	
		(A) (
		(Notary Public)		
SEAL		My commission expires		
<u>Note:</u> If the li Staten	ienholder in repossession manent (Form 78-015).	ssion makes application for title, he must include Odometer Disclosure		

Motor Vehicle Services P.O. Box 1383 Jackson, MS 39215 www.dor.ms.gov Phone 601-923-7200 FAX 601-923-7224