

PO Box 100167, Columbia, SC 29202 office: 803-978-2101 fax: 803-704-1008 email: curis-info@curisfinancial.org www.curisfinancial.org

LIMITED POWER OF ATTORNEY

For a Motor Vehicle or Boat

I, (Grantor- printed nam	ne)						
do hereby name and ap	ppoint, Ann T. Blaine or any	agent of Curis Financial C	redit Union, Address PO				
Box 100167, Columbia, S.C., 29202, to be my lawful attorney-in-fact, to act for me, in applying for an original or duplicate certificate of title, to register, transfer title, or record a lien to the motor vehicle or							
				boat described below, a	ınd to print my name and s	ign their name, on my beho	alf. My attorney-in-fact can
also do all things necessary to the application or any other related instrument and to bind me in as sufficient a manner as I myself could do, were I personally present and signing the same. This power of attorney expires when Curis Financial Credit Union receives the properly executed title on the collateral							
				mentioned below with Curis Financial Credit Union shown as Lienholder.			
With full power of substit	rution and revocation. I here	aby ratify and confirm what	ever my said attorney-in-				
With full power of substitution and revocation, I hereby ratify and confirm whatever my said attorney-in-fact may lawfully do or cause to be done in the virtue hereof.							
ract may lawfally ab of c	ause to be done in the virti	de Hereor.					
Year	Make/Manufacturer	Body Type	Title Number				
Vehicle/Vessel Identification Number							
NOTICE TO OWNER: COMPLETE THIS FORM IN ITS ENTIRETY PRIOR TO SIGNING.							
THO HOE TO OWNER. OOK	III EETE TITIOT OKWITIVITO EIVITI	<u>KETT FRIOR TO GIOTAINO</u> .					
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS							
STATED IN IT ARE TRUE.							
Grantor's Driver's License or SS	# Date of Birt	 h	Daytime Phone #				
	50.000.00	•					
Grantor's Signature			Today's Date				