

**L'Oreal USA Federal Credit Union  
30 L'Oreal Way  
Clark, NJ 07066**

**Private Vehicle Bill of Sale**

Seller's Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_

Vehicle Information

Year & Make \_\_\_\_\_  
Model: \_\_\_\_\_  
Type: \_\_\_\_\_  
VIN #: \_\_\_\_\_  
Mileage: \_\_\_\_\_  
Optional Equipment: \_\_\_\_\_  
Selling Price: \_\_\_\_\_  
Is Vehicle Financed: Yes \_\_\_\_\_ No \_\_\_\_\_  
Finance Company: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
Account Number: \_\_\_\_\_  
Balance Owed: \_\_\_\_\_  
Phone: \_\_\_\_\_

Name(s) under which the vehicle is registered: \_\_\_\_\_  
\_\_\_\_\_

Is the title for this vehicle in your possession? \_\_\_\_\_

Sellers Signatures(s)	_____	_____
Print Name(s)	_____	_____
Buyers Signature(s)	_____	_____
Print Name(s)	_____	_____
C/U Account Number	_____	
Date:	_____	

**Fax to: 732-574-9148**