Date Received:	
Issue Date:	
CSR Initials:_	

020-022 (R 8/13)

Duplicate Certificate of Title Application & Affidavit

To: Debra K. Lathrop Laramie County Clerk P. O. Box 608 Cheyenne, WY. 82003

Fee: Fifteen Dollars (\$15.00)

I hereby make application for a duplicate Wyoming Certificate of Title for the following motor vehicle, trailer, or mobile home, as described below:

Title number:	VIN:	
Make:	Year:	
certificate of title that is (chec	knowledge and belief there are no, other ck one) lost mutilated or des been assigned to any other person, nor is	troyed
I authorize the duplicate certi	ficate of title be mailed to:	
Name:		
City:	State:	Zip:
	rm under penalty of perjury that all of the correct and that I am lawfully applying	
Signature of Applican	t:	
Signature of Applican	t:	
Subscribed and sworn to befo	ore me, by	
On this day of	, 20	
Notary Public or Depu	uty Clerk	
My Commission Expi	res:	Seal or Stamp