Arkansas Business Bill of Sale Form

State of:		
No.:		
This document was signed on the	e day of,	20, between:
1. The Parties:		
Buyer:	_	
Address:		
City:State:	Zip Code:	
Seller:	_	
Address:		
City:State:	Zip Code	:
2. The Business:		
Seller acknowledges they have the	ne right to sell the business	entity known as:
Business Name:		
Address:		
City:	State:	Zip Code:

along with all its assets, interests, and properties, including intellectual property, equipment, leases, contracts, trademarks, customer lists, and any other tangible or intangible assets connected to the business.

3. Purchase Price:
The Buyer and Seller agree to a purchase price of \$
(Dollars). This amount is to be accepted as full payment
for the transfer of the business. The consideration will be paid as follows:
Amount: \$
Form of Payment: (Check one)
☐ Personal check
☐ Cashier's check
☐ Money order
☐ Cash
☐ PayPal
☐ Other:
4. Payment Terms:
Payment is to be made in full on the date of sale. During and after the sale, the
Seller agrees to do everything in their power to educate the Buyer about the
processes of the business.
5. Representations and Warranties:
The Seller warrants that they are the lawful owner of the business, free from any
claims or encumbrances, and have the right to sell the business. The Buyer
acknowledges that they have inspected the business and accept it in its current
condition.
6. Non-Compete Agreement:
The Seller agrees not to compete with the business within a radius of
miles from the current location of the business for a period of years from
the date of sale.

The Buyer agrees to keep all confidential information received during the transaction private and not disclose it to any third parties.	
8. Governing Law:	
This Bill of Sale is governed by the laws of the State of Arkansas.	
9. Signatures:	
Seller Signature:	
Printed Name:	
Date:	
Buyer Signature:	
Printed Name:	
Date:	
Notary Acknowledgement	
State of	
County of	
This instrument was acknowledged before me on this day of	
, 20, by (Seller))
and (Buyer).	
Notary Signature:	
Printed Name:	
Commission Expiration Date:	

7. Confidentiality: