

OFFICIAL VEHICLE REGISTRATION

City Stickers:						DEGLE	TRATION ONLY NUM	950		10765	15
NEW OR CURRENT TITLE NU 90514839	IMBEH			CC	NO1	HEGIS	THATION ONLY NOW	ben .			
OWNER INFORMATION *LEG LAST NAME		FIRST NAME	NAME CODE IN	BOX 1 (SAME	E) 2(DIFFERE	NT) 3(MULTIPLE LAS	ST NAMES) 4(COMPA	NY) 5(OVER 28 CHA FIRST I	NAME	MAO N ILU	
BOWMAN TRA	ILER LEASI	NG LLC				ADDRESS 2 (PHYS	ICAL)				
PO BOX 433	% 10233	GOVERN	OR LN BI	_VD		TABLICO E (TITO					
CITY STATE ZIP						CITY STA				ZIP CODE	
WILLAMSPOR CNTY OF RESIDENCE/PRINCIPAL BUS OF		URCHASE DATE	D 2	21795		TELEPHON	NE # *P	_ACARD/HEARING I	MPAIRED CLS/YR	INSURANCE POLICY	Y #
HAMILTON 03	1	12/14/20	12 LEASEI	O SERV	VICE OPTION INSTRUCTIONS	301	582 1793				10.000
VEHICLE INFORMATION VIN		MAKE	MODEL	YEAR	BODY	TITLE BRAND - tra	anslation	COD	E TYPE OF F	FUEL - translation	CODE
1PNV532B0YG314281		GDAN	1PN	2000	SE	USED			U		9
SURRENDERED TITLE #		STATE PREVIOUS STATES TITL		TITLED	VEHICLE U	INDICAT (List one)		ATOR OVER 10 YE	R ACTUAL (0) NOT ACTUAL (8) COL R OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9)		
11639955 COLOR CODE (enter appropriate code)* UPPER LOWER MOBILE H		ME HOME WDTH # AXLES		GRO	GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCR				1 07645
0				13.961.5.40			TEN METION O				37043
PLATE INFORMATION *(required) PLATE #(1) CL	red for Title and Registr ASSCODE/ISSUEYR(1) 8020/199	(3) VALIDATIO	ion Only Transact N #(1) CO	ions) SEE RE UNTY STICKE	ER #(1) Cr	TY STICKER #(1)(2)	*PLATE #(TRADE IN	V)(2) CLASS C	CODE/ISSUE YR(2	PERMA	
TDR STICKER #(4)	TEMP OPERATOR PE	RMIT #(3)	# OF SEATS(5)	ZONE(CO	UNTY NAME)	(6)	USDOT / REGISTRAN	IT #(7)	N	MOTOR CARRIER #(8)	
STREET	JNTRUST BA					CITY			STATE	ZIP CODE	4/2012
	ALTIMORE S	T 25 FL				BALTII	MORE	23	MD	21202 LIEN DA	ATE
STREET						CITY			STATE	ZIP CODE	
*LESSEE / REGISTRANT INF	ORMATION(OWNER C	F PLATE)	LEGAL S	TATUS	NAME		MAO ILU				
NAME						NAME					
ADDRESS					CI	TY			STATE	ZIP CODE	E
VEHICLE COST / TAX INFOR	MATION *(required for		Transactions)	TAXA	BLE AMOUNT		SALESTAX PAID		*TAX EX	EMPTION REASON / SALE	S TAX #
										DEALER#	
DEALER NAME			DEALE	R ADDRESS						DEALER #	
*Required for Duplicate Title -	T.C.A. 55-3-115 (submi	t Illegible or altered	Certificate of Title	e) (e							
LOST	STOLEN		MUTILATED			'N'D DUE TO NON Di		ALTERED	Division	ILLEGIBLE	
Under penalties of perjury, I he or its assignees to determine to SIGNATURE OF CERTIFIER		nation provided by	me or on my beha	WER OF ATT	TORNEY/AUT	HORIZED SIGNATUR	RE(IF APPLICABLE)		DA	01/04/201	3
13004 @	HAMILT()N	со	NUMBER 33		/04/2013		Y OF REGISTRAR C		LES(COUNTY CLERK)	KAR46
OFFICE USE ONLY REGISTRATION FEE	EMISSION:	Trailer	E FEE		ANS FEE	CLERK FEE		llected Indicated ce	rtifies this form as	s a valid registration) DTAL TAX COLLECTED	
79.75	A SAN WASHINGTON		7-534_04007	7.55			12.00	5.50		.00	
COMPUTATION OF SALES TAX USE T *SERVICE OPT FEE	SALES OR USE TA AX ORGAN DONOR	SA TAX		VER	DDITIONAL T		LECTED IN STATE O	F COUNTY WHE	• • • • • • • • • • • • • • • • • • • •	OTAL FEES COLLECTED 97.25	
	(51/DR46/8020	Cash:	0.00	heck: 0		Check#:	Credit: 0.0	0 Auth#:		2.00	4-692