

City Stickers:

NEW OR CURRENT TITLE NUMBER 84170195 TRANSACTION CODE 001 REGISTRATION ONLY NUMBER

OWNER INFORMATION LEGAL STATUS: 1 (AND) 2 (OR) ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) MAO ILU N LAST NAME FIRST NAME MIDDLE INITIAL LAST NAME FIRST NAME MIDDLE INITIAL
BOWMAN SALES AND EQUIPMENT INC
 ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVERNOR LN BLVD
 ADDRESS 2 (PHYSICAL)
 CITY STATE ZIP CODE
WILLIAMSPORT MD 21202
 CITY STATE ZIP CODE
 CHY OF RESIDENCE/PRINCIPAL BUS OR INCOMP LOCATION
HAMILTON 033
 PURCHASE DATE
06/30/2011
 LEASED 0 SERVICE OPTIONS SEE REVERSE SIDE FOR INSTRUCTIONS
 TELEPHONE #
301 582 1793
 PLACARD/HEARING IMPAIRED CLS/R# *INSURANCE POLICY #

VIN 1GRAA0628YS059037 MAKE **GDM** MODEL **741** YEAR **2000** BODY **SE** TITLE BRAND - list the appropriate code (1) RECONSTRUCTED VEHICLE (2) FLOOD DAMAGE (3) SPECIALLY CONSTRUCTED (4) PARTS ONLY (5) USED (6) DEMO (7) SPECIALTY CONSTRUCTED (8) VEHICLE TYPE **S** VEHICLE USE **F** GROSS VEHICLE WEIGHT **140600** MOBILE HOME LGTH **0** WIDTH **0** # AXLES **0** PREVIOUS STATES TITLED **TN TN** STATE **TN** SURRENDERED TITLE # **59901608** COLOR CODE (enter appropriate code) LOWER **0** UPPER **0**
 PLATE # (1) **U326903** CLASS CODE/ISSUE YR (1)(3) **8020/1994** VALIDATION # (1) COUNTY STICKER # (1) CITY STICKER # (1)(2) PLATE # (TRADE IN) (2) CLASS CODE/ISSUE YR (2) EXPIRATION DATE (1)(2)(3) **PERMANENT**
 TDR STICKER # (4) TEMP OPERATOR PERMIT # (3) # OF SEATS (5) ZONE (COUNTY NAME) (6) USDOT / REGISTRANT # (7) MOTOR CARRIER # (8)

LIEN INFORMATION (if lien present)
 LIEN CODE FIRST LIENHOLDER **SUNTRUST BANK** LIEN DATE **06/30/2011**
 STREET **120 E BALTIMORE 25TH FL** CITY **BALTIMORE** STATE **MD** ZIP CODE **21202**
 LIEN CODE SECOND LIENHOLDER
 STREET CITY STATE ZIP CODE

LESSEE / REGISTRANT INFORMATION (OWNER OF PLATE)
 LEGAL STATUS NAME CODE MAO ILU NAME
 ADDRESS CITY STATE ZIP CODE

VEHICLE COST / TAX INFORMATION (required for Title & Registration Transactions)
 SALE PRICE TRADE IN ALLOWANCE TAXABLE AMOUNT SALESTAX PAID TAX EXEMPTION REASON / SALES TAX #
 DEALER NAME DEALER ADDRESS DEALER #

REQUIRED FOR DUPLICATE TITLE - T.C.A. 55-3-115 (submit illegible or altered Certificate of Title)
 LOST STOLEN MUTILATED RTND DUE TO NON DELIVERY ALTERED ILLEGIBLE

INVOICE NUMBER COUNTY NAME GO NUMBER DATE OF APPLICATION BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES/COUNTY CLERK
11273 @ HAMILTON 33 09/30/2011 W.F. (BILL) KNOWLES
 OFFICE USE ONLY REGISTRATION FEE LEASE FEE TRANS FEE CLERK FEE ISSUANCE FEE TITLE FEE TOTAL TAX COLLECTED
79.75
 COMPUTATION OF SALES OR USE TAX SA TAX LOCAL TAX ADDITIONAL TAX COLLECTED IN STATE OF COUNTY WHEEL TAX CITY STICKER FEE
 TOTAL FEES COLLECTED
97.25
 SERVICE OPT FEE ORGAN DONOR POSTAGE VER ID / RESIDENCY VERIFICATION
 Port: WK48/DR27/8020 Cash: 0.00 Check: 0.00 Check#: 0.00 Credit: 0.00 Auth#: Change: 0.00
 FD-692



140600