



OFFICIAL VEHICLE REGISTRATION

161957

City Stickers:

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| 3W OR CURRENT TITLE NUMBER 84174236 | TRANSACTION CODE N01 | REGISTRATION ONLY NUMBER |
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| OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) 5 | | | MAO <input checked="" type="checkbox"/> N | ILU <input checked="" type="checkbox"/> N |
| ST NAME BOWMAN SALES AND EQUIPMENT INC | FIRST NAME | MIDDLE INITIAL | LAST NAME | FIRST NAME |

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| ADDRESS 1 (MAILING) PO BOX 433 % 10233 GOVENOR LN BLVD | ADDRESS 2 (PHYSICAL) |
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|-----------------------------|--------------------|--------------------------|------|-------|----------|
| CITY WILLIAMSPORT | STATE MD | ZIP CODE 21202 | CITY | STATE | ZIP CODE |
|-----------------------------|--------------------|--------------------------|------|-------|----------|

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|---|------------------------------------|--|------------------------------------|----------------------------------|---------------------|
| TYPE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033 | PURCHASE DATE 06/30/2011 | LEASED <input type="checkbox"/> *SERVICE OPTIONS <input checked="" type="checkbox"/> <small>SEE REVERSE SIDE FOR INSTRUCTIONS</small> | TELEPHONE # 301 582 1793 | *PLACARD/HEARING IMPAIRED CLS/YR | *INSURANCE POLICY # |
|---|------------------------------------|--|------------------------------------|----------------------------------|---------------------|

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|---|---------------------|---------------------|---------------------|-------------------|---|------------------|--|------------------|
| VEHICLE IDENTIFICATION NUMBER 1S12E9486YD467601 | MAKE STRI | MODEL 1S1 | YEAR 2000 | BODY SE | TITLE BRAND - list the appropriate code (N) NEW (U) USED (D) DEMO (S) SPECIALLY CONSTRUCTED (R) PARTS ONLY | CODE U | TYPE OF FUEL - list the appropriate code GAS (1) DIESEL (2) ELECTRIC/HYBRID (3) PROPANE (4) | CODE 9 |
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| PREVIOUSLY REGISTERED TITLE # 0010284701 | STATE OR | PREVIOUS STATES TITLED | VEHICLE USE F | VEHICLE TYPE S | CURRENT MILEAGE | ODOMETER ACTUAL (0) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9) | CODE 1 |
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|---|------------------------------|-------------------|------------|----------------------|-------------------------------|------------------------------------|
| VEHICLE CLASSIFICATION CODE (enter appropriate code)* O | MOBILE HOME LGTH 0 | MOBILE HOME WIDTH | # OF AXLES | GROSS VEHICLE WEIGHT | *VEHICLE TRADE-IN DESCRIPTION | COMPANY VEHICLE # 161957 |
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PLATE INFORMATION *(required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

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|-------------------------------|--|------------------|----------------------|-----------------------|-------------------------|-------------------------|---|
| PLATE # (1) U329358 | 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 |
|-------------------------------|--|------------------|----------------------|-----------------------|-------------------------|-------------------------|---|

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| REGISTRATION STICKER # (4) | TEMP OPERATOR PERMIT # (3) | # OF SEATS (5) | ZONE (COUNTY NAME) (6) | USDOT / REGISTRANT # (7) | MOTOR CARRIER # (8) |
|----------------------------|----------------------------|----------------|------------------------|--------------------------|---------------------|

LIEN INFORMATION (if lien present)

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| LIEN CODE | FIRST LIENHOLDER SUNTRUST BANK | LIEN DATE 06/30/2011 |
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|---|--------------------------|--------------------|--------------------------|
| ADDRESS 120 E BALTIMORE 25TH FL | CITY BALTIMORE | STATE MD | ZIP CODE 21202 |
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|-----------|-------------------|-----------|
| LIEN CODE | SECOND LIENHOLDER | LIEN DATE |
|-----------|-------------------|-----------|

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| LIEN CODE | CITY | STATE | ZIP CODE |
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REGISTRANT INFORMATION (OWNER OF PLATE)

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|-----------------|---------------------------------------|------------------------------------|------------------------------|------------------------------|
| REGISTRANT NAME | LEGAL STATUS <input type="checkbox"/> | NAME CODE <input type="checkbox"/> | MAO <input type="checkbox"/> | ILU <input type="checkbox"/> |
| ADDRESS | CITY | STATE | ZIP CODE | |

VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)

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|---------------|--------------------|----------------|----------------|-------------------------------------|
| VEHICLE PRICE | TRADE IN ALLOWANCE | TAXABLE AMOUNT | SALES TAX PAID | *TAX EXEMPTION REASON / SALES TAX # |
| DEALER NAME | DEALER ADDRESS | DEALER # | | |

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|-------------------------------|---------------------------------|------------------------------------|---|----------------------------------|------------------------------------|
| <input type="checkbox"/> LOST | <input type="checkbox"/> STOLEN | <input type="checkbox"/> MUTILATED | <input type="checkbox"/> RTND DUE TO NON DELIVERY | <input type="checkbox"/> ALTERED | <input type="checkbox"/> ILLEGIBLE |
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I, the undersigned, under penalties of perjury, I hereby certify all information provided is true and correct to the best of my knowledge, and acknowledge that it is not the responsibility of the Motor Vehicle Division to determine the accuracy of the information provided by me or on my behalf.

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| SIGNATURE OF CERTIFIER/OWNER | POWER OF ATTORNEY/AUTHORIZED SIGNATURE (IF APPLICABLE) | DATE 10/12/2011 |
|------------------------------|--|---------------------------|

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| VOICE NUMBER 11285 @ | COUNTY NAME HAMILTON | CO NUMBER 33 | DATE OF APPLICATION 10/12/2011 | BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK) W.F. (BILL) KNOWLES | HJC27 |
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| REGISTRATION FEE 79.75 | CREDIT | LEASE FEE | TRANS FEE | CLERK FEE | ISSUANCE FEE 12.00 | TITLE FEE 5.50 | TOTAL TAX COLLECTED .00 |
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| COMPUTATION OF SALES TAX <input type="checkbox"/> USE TAX <input type="checkbox"/> | SALES OR USE TAX | SA TAX | LOCAL TAX | ADDITIONAL TAX | COLLECTED IN STATE OF | COUNTY WHEEL TAX | CITY STICKER FEE |
|--|------------------|--------|-----------|----------------|-----------------------|------------------|------------------|

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| SERVICE OPT FEE | ORGAN DONOR | POSTAGE | VER | ID / RESIDENCY VERIFICATION | *TOTAL FEES COLLECTED 97.25 |
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