## OFFICIAL VEHICLE REGISTRATION

BOWMAN TRAILER LEASING LLC  ADDRESS 1 (MAILING)  PO BOX 433 % 10233 GOVERNOR LN BLVD  CITY STATE ZIP CODE CITY STATE ZIP CODE  WILLIAMSPORT MD 21795  INTY OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION HAMILTON 033 PURCHASE DATE  HAMILTON 033 PURCHASE DATE  12/14/2012 LEASED O SERVICE OPTIONS SEE REVERSE SIDE FOR INSTRUCTIONS  VEHICLE INFORMATION  VIN MAKE MODEL YEAR BODY TITLE BRAND - translation CODE TYPE OF FUEL - translation CODE  1JJV532F3WF533371 FRUE FBH 1998 SE USED  U 9	City Stickers:				TD	ANGACTION	BEGISTE	A V IIAO IAOITAI	ILIMBER			39036	0
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TELEPHONE   TRANSPORT   TRAN			CITY			STA	TE	ZIP CODE					
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STATE  120 E BALTIMORE ST 25 FL  STATE  120 E BALTIMORE  STATE  120 CODE	TDR STICKER #(4) TEMP OPERATOR PERMIT #(3) # OF SEAT			# OF SEATS(5)	5) ZONE(COUNTY NAME)(6) USDOT / REGISTRAN				RANT #(7)		мото	OR CARRIER #(8)	
LER CODE SECOND LENHOLDER  LER ALSTATUS NAME CODE MAD LLU  NAME  CITY STATE ZIP CODE  LESSEE / REGISTRANT INFORMATION/OWNER OF PLATE)  LEGAL STATUS NAME CODE MAD LLU  NAME  ADDRESS  CITY STATE ZIP CODE  VEHICLE COST / TAX INFORMATION * (required for Title & Registration Transactions)  SALE PRICE TRADE IN ALLOWANCE TAX DELETED ADDRESS  DEALER ADDRESS  DEALER ADDRESS  DEALER #  DEALER ADDRESS  DEALER #  DEALER ADDRESS  DEALER #  DEALE	LIEN CODE FIRST LIEN  STREET	JNTRUST BA						ODE				12/14 ZIP CODE	
**UESSEE / REGISTRANT INFORMATION/OWNER OF PLATE**)  **LESSEE / REGISTRANT INFORMATION/OWNER OF PLATE**)  **LESSEE / REGISTRANT INFORMATION/OWNER OF PLATE**)  **NAME**  **ADDRESS***  **CITY***  **STATE**  **ZIP CODE**  **VEHICLE COST / TAX INFORMATION **(required for Title & Registration Transactions)**  **SALE PRICE**  **TRADE IN ALLOWANCE***  **TRADE IN ALLOWANCE**  **TRANSE AND TAX EXEMPTION REASON / SALES TAX #  **DEALER NAME**  **DATE NAME**			1 25 FL				BALTIVI	URE			IVID		TE
NAME  ADDRESS  CITY  STATE  ZIP CODE  VEHICLE COST / TAX INFORMATION **(required for Tifle & Registration Transactions)*  SALE PRICE  TRADE IN ALLOWANCE  TRADE IN ALLOWANCE  TRADE IN ALLOWANCE  DEALER ADDRESS  DEALER #  DEALER #  DEALER #  DEALER #  DEALER #  TRADE IN ALLOWANCE  TRADE IN ALLOWANCE  DEALER #  DEALER	STREET					<u>,                                    </u>	CITY			STAT	E	ZIP CODE	
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DEALER NAME  DEALER ADDRESS  DEALER #  *Required for Duplicate Title - T.C.A. 55-3-115 (submit llienlible or altered Certificate of Title)  LOST  STOLEN  MUTILATED  RTND DUE TO NON DELIEVERY  ALTERED  ILLEGIBLE  Under penalties of periph, 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 or its assignees to determine the accuracy of the information provided by me or or my behalf.  SIGNATURE OF CERTIFIER/OWNER  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  01/08/2013  NIVOICE NUMBER  CONUMBER  CONUMBER  CONUMBER  ATTAX EXEMPTION REASON/SALES TAX #  DEALER #  DEALER #  ALTERED  ILLEGIBLE  DATE  01/08/2013  NIVOICE NUMBER  CONUMBER  CONUMBER  AND DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  W.F. (BILL) KNOWLES  KAR46  OFFICE USE ONLY  EMISSION: Trailer  (total fees collected Indicated certifies this form as a valid registration)  REGISTRATION FEE  TOTAL TAX COLLECTED  SALES OR USE TAX  SERVICE OFF FEE  ORGAN DONOR  POSTAGE  VER  ID / RESIDENCY VERIFICATION  "TOTAL FEES COLLECTED	ADDRESS					CIT	L Y			STA	TE	ZIP CODE	
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 DELIEVERY  ALTERED  ILLEGIBLE  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 or its assignees to determine the accuracy of the information provided by me or on my behalf.  SIGNATURE OF CERTIFIER/OWNER  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  01/08/2013  INVOICE NUMBER  CONUMBER  CONUMBER  CONUMBER  DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  TOTAL TAX COLLECTED  TOTAL TAX COLLECTED  SALES OR USE TAX  SA TAX  LOCAL TAX  ADDITIONAL TAX  COLLECTED IN STATE OF  COUNTY WHEEL TAX  CITY STICKER FEE  SERVICE OFF FEE  ORGAN DONOR  POSTAGE  VER  ID / RESIDENCY VERIFICATION  "TOTAL FEES COLLECTED	VEHICLE COST / TAX INFOR			n Transactions)							T	770 N D	. TAV 4
*Required for Duplicate Title - T.C.A. 55-3-115 (submit Illegible or altered Certificate of Title)  LOST  STOLEN  MUTILATED  MUTILATED  RTND DUE TO NON DELIEVERY  ALTERED  LLEGIBLE  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 or its assignées to determine the accuracy of the information provided by me or on my behalf.  FOWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  O1/08/2013  NVOICE NUMBER  CONTY NAME  CONUMBER  CONUMBER  CONUMBER  DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  13008  HAMILTON  33  01/08/2013  W.F. (BILL) KNOWLES  KAR46  OFFICE USE ONLY  EMISSION: Trailer  (total fees collected indicated certifies this form as a valid registration)  REGISTRATION FEE  GREDIT  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  COUNTY WHEEL TAX  "SERVICE OPT FEE  ORGAN DONOR  POSTAGE  VER  HOTOR TESTS COLLECTED  TOTAL FEES COLLECTED  "TOTAL FEES COLLECTED  "TOTAL FEES COLLECTED  "TOTAL FEES COLLECTED		TRADE IN AI	LOWANCE	DEAL				SALESTAX P	AID				) IAX #
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 or its assignees to determine the accuracy of the information provided by me or on my behalf.  SIGNATURE OF CERTIFIER/OWNER  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  01/08/2013  INVOICE NUMBER  COUNTY NAME  CONUMBER DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  13008 @ HAMILTON  33 01/08/2013  W.F. (BILL) KNOWLES  KAR46  OFFICE USE ONLY  EMISSION: Trailer  REGISTRATION FEE  CREDIT  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  "SCRVICE OPT FEE  ORGAN DONOR  POSTAGE  VER  ID / RESIDENCY VERIFICATION  "TOTAL FEES COLLECTED  "TOTAL FEES COLLECTED			010000000000000000000000000000000000000		Berry Zuffel	<b>是</b> )是300000000000000000000000000000000000							
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13008 @ HAMILTON 33 01/08/2013 W.F. (BILL) KNOWLES KAR46  OFFICE USE ONLY EMISSION: Trailer  (total fees collected Indicated certifies this form as a valid registration)  REGISTRATION FEE CREDIT  1500 5.50  COMPUTATION OF SALES OR USE TAX SA TAX LOCAL TAX ADDITIONAL TAX COLLECTED IN STATE OF COUNTY WHEEL TAX CITY STICKER FEE  SERVICE OPT FEE ORGAN DONOR POSTAGE VER ID / RESIDENCY VERIFICATION *TOTAL FEES COLLECTED  *TOTAL FEES COLLECTED  *TOTAL FEES COLLECTED  *TOTAL FEES COLLECTED			on provided is true nation provided by	P	OWER OF AT	TORNEY/AUTH	ORIZED SIGNATURE	(IF APPLICABL	E)		(2-24.07 to 20)		3
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SE-1357 Port: WK51/DR46/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00 RDA-692	☐ SALES TAX ☐ USE T	AX					ID / RESIDENCY	VERIFICATION			*TOTA	L FEES COLLECTED	