

TENNESSEE DEPARTMENT OF REVENUE VEHICLE TAXPAYER SERVICES DIVISION MULTI-PURPOSE APPLICATION

OFFICIAL VEHICLE REGISTRATION

City Stickers:										56203	3	
NEW OR CURRENT TITLE NUMBER 91442366					NO1	REGISTRATION ONLY NUMBER						
OWNER INFORMATION *LEG LAST NAME BOWMAN TRA		FIRST NAME	Committee of the Commit	N BOX 1 (SAMI		NT) 3(MULTIPLE LAST LAST NAME	NAMES) 4(COMPA	NY) 5(OVER 28 CHAR. FIRST NA		MAO N ILU MIDDLE INITI	J N	
ADDRESS 1 (MAILING) PO BOX 433	% 10233	GOVERN	IOR I N B	N VD		ADDRESS 2 (PHYSIC	CAL)					
CITY	76 10200	STAT		ZIP CODE		CITY			STATE	ZIP CODE		
WILLIAMSPOR	M PURCHASE DATE	21795		TELEPHONE # 'PLACARD/HEARING IMPAIRED CLS/YR 'INSURANCE POLICY #								
HAMILTON 03		12/14/20	LEASI	ED 0 SER	VICE OPTION:	301 5	82 1793					
VEHICLE INFORMATION VIN		MAKE	MODEL	YEAR	BODY	TITLE BRAND - tran	nslation	CODE	TYPE OF	FUEL - translation	CODE	
1PT01JAH4X9004291		TRIM 1PT 1		1999	SE	USED		U	9			
SURRENDERED TITLE #	STATE PR	EVIOUS STATES	STITLED	VEHICLE U	SE VEHICLE TYPE	CURRENT MI	INDICAT	OR OVER 10 Y) NOT ACTUAL (8) RS / 16,000 LBS (1)	CODE		
11639927	ME			F	S	S (List one) IN E			OF MECHANICAL LIMITS (9)	1		
COLOR CODE (enter appropriate UPPER LOWER	HOME # AXLES			GROSS VEHICLE WEIGHT		*VEHICLE TRADE-IN DESCRIPTION			COMPANY VEHICLE # 56203			
PLATE INFORMATION *(require	red for Title and Registr ASSCODE/ISSUEYR(1			ctions) SEE RE			RUCTIONS *PLATE #(TRADE IN	I)(2) CLASS COI	DE/ISSUE YR(2	EXPIRATION DATE	E (1)(2)(3)	
U409667	8020/199	4				2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				PERM	IANEN	
TDR STICKER #(4)	RMIT #(3)	MIT #(3) # OF SEATS(5) ZONE(COUNTY NAME)			6) USDOT / REGISTRANT #(7)		MOTOR CARRIER #(8)					
STREET 120 E BALTIMORE ST 25 FL LIEN CODE SECOND LIENHOLDER					BALTIMORE ST				MD			
STREET						CITY			STATE	ZIP CODE		
*LESSEE / REGISTRANT INFO	DRMATION(OWNER O)F PLATE)	LEGAL	STATUS	NAME	CODE N	MAO ILU [
ADDRESS					CIT	TY			STATE	ZIP COD	E	
VEHICLE COST / TAX INFORM SALE PRICE	MATION *(required for TRADE IN AL		Transactions)	TAXA	BLE AMOUNT		SALESTAX PAID		*TAX EX	EMPTION REASON / SALE	ES TAX #	
DEALER NAME	DEALER ADDRESS								DEALER#			
*Required for Duplicate Title - T	r.C.A. 55-3-115 (submit	t Illegible or altered	Certificate of Tit	le)								
LOST	STOLEN		MUTILATE			N'D DUE TO NON DEL		ALTERED		ILLEGIBLE		
Under penalties of perjury, I her or its assignees to determine the SIGNATURE OF CERTIFIER/C		on provided is true nation provided by				icknowledge that it is n	(IF APPLICABLE)		DA	01/16/201	3	
13016 @	HAMILT()N	CC	NUMBER 33	DATE OF AP	PELICATION /16/2013		OF REGISTRAR OF R		LES(COUNTY CLERK)	HJC27	
OFFICE USE ONLY REGISTRATION FEE	EMISSION:	Trailer	E FEE		ANS FEE			lected Indicated certifi	es this form as		110027	
79.75	SALES OR USE TA				DDITIONAL TA	CLERK FEE	12.00	5.50		.00 TY STICKER FEE		
SALES TAX USE TA		POST		VER		ID / RESIDENCY			•т	OTAL FEES COLLECTED		
Port: WK	49/0027/9020	Cach	0.00	Shook: 0	00 7	hookille	Cradit: 0.00	Auth#-	Chan	97.25		