

## **OFFICIAL VEHICLE REGISTRATION**

City St	ickers:																		6747	230	
	RRENT TITLE NU	MBER						77	RANSACTION CODE	٧	RE	GISTRA	ATION ONL'	YNUMBER							
OWNER INF	ORMATION LEG	AL STATU:	S: 1 (AND) 2 (	DR)	ENTER I	NAME CO	DDE IN BO	X 1 (SAM	IE) 2(DIFFER	ENT) 3	(MULTIPLE	LAST	NAMES) 4(C	OMPANY)	OVER 2	28 CHARACT	ERS) 5		MAO N	ııı N	
LAST NAME	MAN SAL		F	INST IVA	MIC.		MIDD	LE INITIA	YL.	LAS	TNAME				F	TRST NAME			MIDDLE	INITIAL	
ADDRESS 1										ADD	RESS 2 (PI	HYSICA	AL)								
	OX 433	%	10233 (	GOVE	STATE			ZIP CODI		CIT						S	TATE		ZIP CODE		
WILLIAMSPORT MD  DITY OF RESIDENCE PRINCIPAL BUS OR INCORP LOCATION   PURCHASE DATE							21795				TELEPHONE #   *PLACARD/HEARING IMP							WR T	INSURANCE P		
	LTON 03	_		06/3	0/201	17	LEASED SEE REVER	SE SIDE FO	RVICE OPTIC	NS _	11		82 179	3		- 1 Table			Social Control	San Sanda San	
VEHICLE IN	FORMATION		1+1335å4. 	MAKE	<u> Harri</u> a	MODE	i I	YEAR	BODY	TIT	TLE BRANC	-list the		e code		CODE	TYPE O		list the appropriat		ODE
1JJV532W51L665509				WABA			1JJ 200		SE	0000	(N)NEW (1)REC (U)USED (2)FLO (D)DEMO (3)SPE		the appropriate code CONSTRUCTED VEHICLE DOD DAMAGE ECIALLY CONSTRUCTED		,	i i		GAS (1) ELECTRIC/HI DIESEL (2) PROPANE (4		/BRID (3)	
							TATES TITLED VEHICLE				VEHICLE		<del></del>		GE ODOMETER ACTUA			NL (0) NOT ACTUAL (8)			CODE
76958239				TN	TN ME			F			s			l äi		(List one)	(List one) IN EXCESS OF MEC			(9)	1
COLOR CODE (enter appropriate code)* UPPER LOWER  MOBILE H LGTH				ME WDTH			AXLES	GR	OSS VEHICL	E WEIG	WEIGHT *VEHICL			E TRADE-IN DESCRIPTION				COMPANY VEHICLE # 674230			
7.7.7.7.7	EMATION *(requi													等技术							433
PLATE #(1)			188UEYR(1)(: <b>20/199</b> 4	` I	.IDATIO	N #(1)	COUN	ITY STIC	KER #(1)	CITY ST	TICKER #(1)	(2)	PLATE #(TR	RADE IN)(2)	CI	LASS CODE/	ISSUE Y	₹(2)	EXPIRATION	RMAN	
U330579 8020/ TDR STICKER #(4) TEMP OPERAT							TS(5)	OUNTY NAM	E)(6)	6)		USDOT / REGISTRANT #(7)		)		MOTOR CARRIER \$(8)					
	- 16.5 V _ 1 1.5			Z 477 Z:	Argania.								<u>,</u> , , , , , , , , , , , , , , , , , ,		<b>7</b> 4.55	Ŋ.					T., 1819
LIEN INFOR	FIRST LIEN	HOLDER	<u> </u>	1 1 1 1 1 1 1	114000	<u> </u>		*, *,					<u> </u>		100 to 100	***************************************				EN DATE	
	SL	INTRI	JST BA	NK				_					_		_					6/30/	2011
STREET	120 F BA	II TIM	ORF 25	TH F	1					CITY	BAL	TIM	ORE			STA	MD		ZIP COD 21202	E	
120 E BALTIMORE 25TH FL  LIEN CODE SECOND LIENHOLDER						DAL IIIIO (L								-			lu	EN DATE			
STREET										CITY	,					STA	NTE		ZIP COD	E	
"LESSEE/!	REGISTRANT INF	ORMATIO	WOWNER OF	PLATE)			EGAL STA	nus 🗀	] NAM	E COD	е <b>П</b>	M	AO 🔲	1.U 🗆			i iQu TZ				
NAME										NA											
ADDRESS										CITY						ST	ATE		ZIP	CODE	
VEHICLE C	OST/TAX INFOR	MATION *	required for T	tie & Reg	stration	Transacti	ons)				alay u pil				5 28	May 4			Tale.		
SALE PRIC	E	1	TRADE IN ALL	OWANC!	•			TAX	ABLE AMOU	NT			SALESTA	X PAID			TAX	EXEMPT	TON REASON /	SALES TA	AX #
DEALER NAME							DEALER A	ADDRES	s							DEALER #					
*Required for	or Duplicate Title -	T.C.A. 554	3-115 (submit	(legible o	altered	Certificat	e of Tive)	1./j. (.)				10.C					<u>68), (1)</u>	T —			
Los	т	╽Ш	STOLEN		$ \sqcup$	MU	TILATED			RTN'D E	OUE TO NO	N DELI	EVERY		ALTER	ED			ILLEGIBI	.E	
Under penal or its assign	ties of perjury, I he ees to determine the	reby certify ne accuracy	all information of the informa	n provided	is true a	and correction on i	t to the be	st of my k	unowledge, an	d ackno	wledge that	it is no	t the respon	sibility of the	Motor Ve	ehicle Divisio	n				
SIGNATUR	E OF CERTIFIER	OWNER					POW	ER OF A	ITORNEY/AU	THOR	HORIZED SIGNATURE(IF APPLICABLE)  PPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR							11/01/2011			
1130			YNAME AMILTO	M			CON	JMBER 22	DATE OF				T			RAR OF MO		HCLES(C	OUNTY CLERI		AR46
OFFICE US	E ONLY	EN	IISSION: T		LIEARS	· ccr		33		1/01	/2011		(total f	ees collecte	d Indica	ted certifies		as a val	id registration)		-11740
79.75		CRED			LEASE	ret		"	RANS FEE		CLERK FE	E	12.		TITLE FE	εε .50		.00		U	
COMPUTA	TION OF		OR USE TAX	1	SA TAX		LOCAL T	AX	ADDITIONAL	. TAX	T	COLLE	CTED IN ST	ATE OF	COUNTY	Y WHEEL TA	х	CITY ST	ICKER FEE		
*SERVICE			N DONOR		POSTA	₩GE		VER	•		ID / RESID	ENCY \	VERIFICATI	ON					FEES COLLEC	TED	
L	Port: WK	  E1/DB	46/9030	<u> </u>	sh: (	0.00	Ch	eck:	0.00	Che	ck#:		Credit:	0.00	Διr	th#:	Ch	97.	25 0.00	RDA-69	