

OFFICIAL VEHICLE REGISTRATION

City Stickers:					7544040704		OTT 4 TION ON WA				77416	2
NEW OR CURRENT TITLE NUMBER 90475142					TRANSACTION CODE NO1	HEG	STRATION ONLY N	IOMBEH				
OWNER INFORMATION *LEG	AL STATUS: 1 (AND) 2	(OR) E	NTER NAME CO	ODE IN BOX 1 (5	SAME) 2(DIFFERE	NT) 3(MULTIPLE L	AST NAMES) 4(CO	MPANY) 5(OVER	28 CHARACT	ERS) 4	MAO N ILU	N
LAST NAME BOWMAN TRA	ILER LEASII	riasi nami	E	MIDDLE IN	MAL	LAST NAME			FIRST NAME		MIDDLE INITIAL	•
ADDRESS 1 (MAILING)						ADDRESS 2 (PHY	SICAL)					
10233 GOVERNOR LN BLVD CITY STATE ZIP CODE									ST	ATE	ZIP CODE	
WILLIAMSPOR	rT			2179		CITY						
		ngiodionto i			SERVICE OPTION	301 582 1793			ED CLS/YR	*INSURANCE POLICY		
VEHICLE INFORMATION		MAKE	MODE	L YEAR	ВОДУ	TITLE BRAND -	translation		CODE	TYPE OF FUEL	- translation	CODE
3H3V532C75T072049		HYT	_	i i					U	2 07 1 02.		9
		STATE			VEHICLE U	JSE VEHICLE TYPE CURRENT MII		TMILEAGE	MILEAGE ODOMETER ACT		CIAL (O) NOT ACTUAL (8)	
101340412088	WI			F	S				OVER 10 YRS / 16,000 LBS (1) IN EXCESS OF MECHANICAL LIMITS (9)			
COLOR CODE (enter appropriate code)* UPPER LOWER MOBILE HOME WOTH				AXLES	GROSS VEHICLE WEIGHT "VEHICLE TRADE-IN DESCRIPTION					٥	COMPANY VEHICLE #	4162
PLATE INFORMATION *(requi	red for Title and Registr	ation and Rec	aistration Only T	ransactions) SEf	REVERSE SIDE	FOR COMPLETE IN	NSTRUCTIONS	<u> </u>				+102
PLATE #(1) CL	ASSCODE/ISSUEYR(1) 8020/199	(3) VALIE	DATION #(1)	COUNTY ST		TY STICKER #(1)(2		DE IN)(2)	CLASS CODE/IS	SSUE YR(2)	EXPIRATION DATE (
	TEMP OPERATOR PE		# OF SEAT	rs(5) ZONE	(COUNTY NAME)	(6)	USDOT / REGIST	RANT #(7)		MOTO	PERMA OR CARRIER #(8)	NENI
LIEN INFORMATION (If lien pr		er e					<u> </u>		Take a			:
	INTRUST BA	NK									06/29	
STREET 120 E BALTIMORE ST 25 FL					CITY STATE BALTIMORE					ZIP CODE		
	ENHOLDER	1 23 FL				BALII	INORE			MD	21202 LIEN DAT	E
STREET						CITY			STAT	E	ZIP CODE	
*LESSEE / REGISTRANT INFO	ORMATION(OWNER OF	PLATE)	LE	CAI CT4710	NAME			П				
NAME				GAL STATUS L	147/14/E /		MAO L IL	ULJ				
				GALSIAIUS I	LLL (VAVIE)	NAME	MAO LJ IL	<u>U - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - </u>				
ADDRESS	-			SALSTATUS T	CIT	NAME	MAO LJ (L	U	STA	TE	ZIP CODE	
VEHICLE COST/TAX INFORM	AATION *(required for Ti	tle & Registr			-	NAME	MAO LJ & IL	U L- J	STA	TE	ZIP CODE	
	MATION *(required for TI TRADE IN ALL			ns)	-	NAME	MAO L IL	, leg	STA		ZIP CODE	TAX #
VEHICLE COST/TAX INFORM			ation Transaction	ns)	CII	NAME		, leg	STA	TAX EXEMPT		TAX #
VEHICLE COST/TAX INFORM SALE PRICE DEALER NAME	TRADE IN ALL	OWANCE	etion Trensaction	TA DEALER ADDRE	CII	NAME		, leg	STA	TAX EXEMPT	ΠΟΝ REASON / SALES 1	FAX #
VEHICLE COST/TAX INFORM SALE PRICE DEALER NAME	TRADE IN ALL	OWANCE	etton Transaction Cered Certificate	TA DEALER ADDRE	CONTRACTOR OF THE CONTRACTOR O	NAME	SALESTAX PA	, leg		TAX EXEMPT	ΠΟΝ REASON / SALES 1	FAX #
VEHICLE COST / TAX INFORM SALE PRICE DEALER NAME "Required for Duplicate Title - T LOST Under penalties of perjury, I here or its assigness to determine the	C.A. 55-3-115 (submit) STOLEN Sty certify all information accuracy of the information	OWANCE	etion Trensaction C ered Certificate MUTIL	DEALER ADDRE of Title) LATED to the best of my	AXABLE AMOUNT SSS ATN I knowledge, and a	NAME TY N'D DUE TO NON D cknowledge that it is	SALESTAX PA	ALTERI	ED	TAX EXEMPT	TION REASON / SALES T	TAX #
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VEHICLE COST / TAX INFORM SALE PRICE DEALER NAME "Required for Duplicate Title - T LOST Under penalties of perjury, I here of its assigness to determine the SIGNATURE OF CERTIFIER/O NVOICE NUMBER 12226 @ DEFICE USE ONLY	C.A. 55-3-115 (submit) STOLEN aby certify all information accuracy of the informs WNER COUNTY NAME HAMILTO EMISSION: TO	Regulate or all a provided is a provided in provided.	ered Certificate MUTIL True and correct by me or on my	DEALER ADDRE of Title) LATED to the best of my y behalf. POWER OF /	AXABLE AMOUNT SSS ATTA ATTORNEY/AUTH DATE OF AP	NAME TY ND DUE TO NON D cknowledge that it is ORIZED SIGNATUR PLICATION 13/2012	ELIEVERY The notitie responsibilities and the responsibilities are responsibilities and the res	ALTERI try of the Motor Vi) RITY OF REGIST BILL) KN collected Indica	ED ehicle Division RAR OF MOTO OWLES ted certifies th	DATE DATE Som as a valid	TION REASON / SALES TO THE SALER # ILLEGIBLE 08/13/2012 OUNTY CLERK) H id registration)	JC27
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