

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

## OFFICIAL VEHICLE REGISTRATION



| 1434946   ME  | City Stickers:   |                       |  |                           |                       |   |                 |                  |                              |                        | DALIMIT AL  |                          | STATE       |
|---|--|-----------------------|--|---------------------------|-----------------------|---|-----------------|------------------|------------------------------|------------------------|-------------|--------------------------|-------------|
| OWER BUTCHWITCH (EAU STATUS 1 MID) 2 800  | NEW OR CURRENT TITLE NUMBER  |                       |  |                           | TE                    |   | REGIS           | STRATION ONLY    | NUMBER                       |                        |             |                          |             |
| DEST TRAILER LEASING LLC  ADDRESS TRAILER L  | 94494752   |                       |  |                           |                       |   |                 |                  |                              |                        | [4]         | N                        | [N]         |
| ADDRESS 1 (MAJARO) 1023 GOVERNOR LIN BLVD  OTY  STATE  STA  |  | (OR) ENTER I          | NAME CODE IN                                 | BOX 1 (SAM<br>DDLE INITIA | E) 2(DIFFEREI<br>L    | NT) 3(MULTIPLE LAST NAMES) 4(COMPANY<br>LAST NAME |                 |                  | VER 28 CHARACT<br>FIRST NAME | ERS)                   |             |                          |             |
| 10233 GOVERNOR LN BLUD   OTT  | BSE TRAILER I  | LEASING LL            | .C   |                           |                       |   |                 |                  |                              |                        |             |                          |             |
| WILLIAMSPORT WILLI  |  | IOD I N DI V          | 'n   |                           |                       |   | ADDRESS 2 (PHY  | SICAL)           |                              |                        |             |                          |             |
| THE PROPOSE OF THE PR  |  | OK LN BLV             |  |                           | ZIP CODE              |   | CITY            |                  |                              | ST                     | ATE         | ZIP CODE                 |             |
| HAMILTON 033  10/30/2014  **LARADE_OFF SERVICE OFFICIAL TRANSPORT OF THE CONTROL   | WILLIAMSPORT   |                       | MD   | VID 21795                 |                       |   |                 |                  |                              |                        |             |                          |             |
| MAKE  | TOKOTAGE   |                       |  | A                         |                       |   | us l            |                  |                              | O/HEARING IMPAIR       | RED CLS/YR  | *INSURANCE POLIC         | Υ#          |
| TUINTS32D2BL279729 WABA 1JJ 2011 SE USED  UNDIREDRESS TREET  STATE PREVIOUS STATES TITLED VEHICLE USED VEHICLE VEHICL  |  |                       | MAKE   | MODEL                     | VEAD                  | PODY  | TITLE BRAND     | ranglation       |                              | CODE                   | TYPE OF FUE | EL - translation         | CODE        |
| STATE PREVIOUS STATES TITLED VEHICLE USE VEHICLE TYPE CURRENT MALESCE COMMENT AND ACTUMENT BY A STATE PREVIOUS STATES TITLED VEHICLE SERVICE VEHICLE TYPE CURRENT MALESCE COMMENT ACTUMENT BY A STATE SERVICE OF MECHANISM STATES THE COMMENT ACTUMENT BY A STATE SERVICE OF MECHANISM STATES THE COMMENT ACTUMENT BY A STATE SERVICE OF MECHANISM SERVIC  |  |                       |  | an Arriva                 |                       | . CE  |                 | u ari SiduOri    |                              |                        |             |                          |             |
| COMPANY VEHICLE FACE NOTE SECOND CORRESPOND AND COMPANY VEHICLE FACE NOTE SECOND COMPANY VEHICLE FA  |  |                       |  |                           |                       |   |                 | PE CURREN        | T MILEAGE                    | GE ODOMETER ACTUAL (0) |             | NOT ACTUAL (8) CODE      |             |
| PALE ENCORPANION Transmiss for the set Resistation and Resistation Coint Transmission SEE RESISES SIDE FOR COMPLETE INSTRUCTIONS  PARALE 4(1) CLASSCODERISES (PREVIOUS) AUDITOR 4(1) COUNTY STICKER 4(1) CITY STICKER 4(1) PALE 4(IRADE IN)(2) CLASS CODERISUE VR(2) EXPIRATION DATE (1)(2)(2)  U548483 802011994 PERMANEN  TOR STICKER 4(4) TEMP OPERATOR PERMIT 4(7) FOR SEATS(5) ZONE(COUNTY NAME)(6) USDOT / REGISTRANT 4(7) MOTOR CARRIER 4(8)  PERMANEN  TOR STICKER 4(4) TEMP OPERATOR PERMIT 4(7) FOR SEATS(5) ZONE(COUNTY NAME)(6) USDOT / REGISTRANT 4(7) MOTOR CARRIER 4(8)  UEN DATE  UEN DATE  SUNTRUST BANK  STATE  UEN DATE  TO CODE  SECOND LENHOLDER  SUNTRUST BANK  STATE  STATE  CITY  STATE  ZIP CODE  TESSEE / REGISTRANT INFORMATION/OWNER OF PLATE)  NAME  ADDRESS  OITY  STATE  ZIP CODE  VEHICLE COST / TAX INFORMATION/OWNER OF PLATE)  INFORMATION TIME A Resistration Transmissions  DEALER NAME  DEALER AND TIME 5 TO A 55-2115 from Illingible of allered Certificate in Time 1 and 1 my incompletes, and advandancy in the new proposability of the Motor Vehicle Division  DEALER NAME  DEALER AND TIME TO A SHARPMANION THE Institution of the SERIES STATE STATE STATE STATE  POWER OF A THROUGHOUSE SITE OF A PROJUMENT OF RESISTANT OF MOTOR VEHICLE SIGNATURE FOR THE SERIES SIGNATURE FOR TIME 1 STATE STATE  DEALER NAME  DEALER ADDRESS  DEALER AS STATE  DEALER   |  |                       | ME   |                           |                       | F   | s               |                  |                              | (List one) IN EXCESS   |             | OF MECHANICAL LIMITS (9) |             |
| PLATE INFORMATION (Insured for Tile and Registration Orley Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS  CLUSSCODERSUEVR(1)(0)  VALIDATION (I)  VALIDATION (II)  VALIDATION (II)  VALIDATION (II)  VALIDATION (II)  VALIDATION (III)  VALI  | COLOR CODE (enter appropriate code)* UPPER LOWER  MOBILE HOME WDTH |                       |  | # AXLES                   | GRO                   | OSS VEHICLE                                       | WEIGHT          | *VEHICLE         | TRADE-IN D                   | ESCRIPTION             |             |                          |             |
| PLATE 4(1)   CLASS CODERSSEYR((1))   VALIDATION 4(1)   COUNTY STICKER 4(1)   CTY STICKER 4(1)(2)   THATE 4(TRADE IN)(2)   CLASS CODERSSEY YR(2)   PERMANEN   TOR STICKER 4(1)   TEMP OPERATIOR PERMIT 4(2)   # OF SEATS(5)   ZONE(COUNTY NAME)(9)   USDOT / REGISTRANT 4(7)   MOTOR CARRIER 4(9)  |  |                       |  |                           |                       |   |                 |                  |                              |                        |             | 90                       | 0326        |
| TDISTICKER (4) TEMP OPERATOR PERMIT (4) # OF SEATS(5) ZONE(COUNTY NAME)(6) USDOT / REGISTRANT (7) MOTOR CARRIER (8)  LIEN NFORMATION OF ITEM DEVELOP.  LIEN NFORMATION OF ITEM DEVELOP.  STATE JUP CODE  120 E BALTIMORE ST 25 FL  STATE JUP CODE  120 E BALTIMORE ST 25 FL  STATE JUP CODE  SECOND LIENHOLDER.  STATE JUP CODE  STATE JUP CODE  LIEN DATE  LIEN  |  |                       |  |                           |                       |   |                 |                  | DE IN)(2)                    | CLASS CODE/I           | SSUE YR(2)  | EXPIRATION DATE          | € (1)(2)(3) |
| LIER INFORMATION IT It less presents LIER INFORMATION IT It less presents LIER ODE PREST LIER OD  |  |                       |  |                           |                       |   |                 |                  |                              |                        |             | PERM                     | ANENT       |
| SUNTRUST BANK  SUNTRUST BANK  120 E BALTIMORE ST 25 FL  BALTIMORE  SECOND LIENHOLDER.  LIEN DATE  120 CODE  SECOND LIENHOLDER.  LIEN DATE  LIEN  | TDR STICKER #(4)   | EMP OPERATOR PER      | RMIT #(3) # 0                                | OF SEATS(5)               | ZONE(CO               | UNTY NAME)(                                       | 6)              | USDOT / REGIST   | RANT #(7)                    |                        | мот         | OR CARRIER #(8)          |             |
| SUNTRUST BANK  SUNTRUST BANK  120 E BALTIMORE ST 25 FL  BALTIMORE  SECOND LIENHOLDER.  LIEN DATE  120 CODE  SECOND LIENHOLDER.  LIEN DATE  LIEN  | LIEN INFORMATION (If lien pre                                      | sent)                 |  |                           | 1                     |   |                 |                  |                              |                        |             |                          |             |
| STREET  120 E BALTIMORE ST 25 FL  BALTIMORE  SECOND LIENHOLDER  LEGAL STATUS  NAME CODE  LESSEE/ REGISTRANT INFORMATION/CWNER OF PLATE)  LEGAL STATUS  NAME CODE  NAME  ADDRESS  CITY  STATE  ZIP CODE  LEGAL STATUS  NAME  ADDRESS  CITY  STATE  ZIP CODE  LEGAL STATUS  NAME  ADDRESS  CITY  STATE  ZIP CODE  TRADE IN ALLOWANCE  TREQUIRED OF DUPLICATE THE -T. C.A. \$5.3-115 (submit) illegible or altered Certificate of Tise)  WOULD THE POWER OF ATTORNEY/AUTHORIZED SIGNATURE (F APPLICABLE)  Judge perallises of pegury, I neetby certify all information provided is the and correct to the best of my knowledge, and acknowledge that it is not the responsibility of the Motor Vehicle Division  SIGNATURE OF CERTIFIEROWNER  POWER OF ATTORNEY/AUTHORIZED SIGNATURE (F APPLICABLE)  DATE  11/24/2014  NODICE NUMBER  COUNTY NAME  CO NUMBER  CON NUMBER  DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)  14328  HAMILTON  33 11/24/2014  W.F. (BILL) KNOWLES  HCM2  FREGISTRATOR FEE  TRANS FEE  CLERK FEE  SULANCE FEE  TRANS FEE  TRANS FEE  CLERK FEE  SULANCE FEE  TRANS FEE  TRANS FEE  CLERK FEE  TRANS FEO  CLERT FEE  TRANS FEE  TRANS FEE  CURTY WHEEL TAX  COLLECTED IN STATE OF COUNTY WHEEL TAX  CITY STICKER FEE  TO STATE  ZIP CODE  ALEGORE  ADDITIONAL TAX  COLLECTED IN STATE OF COUNTY WHEEL TAX  CITY STICKER FEE  TO STATE  TO CODE  THE ALEGORE  TRANS FEE  |  |                       |  |                           | -30/01-01-01-01-01-01 |   |                 |                  |                              |                        |             |                          |             |
| 120 E BALTIMORE ST 25 FL  BALTIMORE  SECOND LIENHOLDER.  LEND DATE  |  | NTRUST BA             | NK   |                           |                       |   | OITY            |                  |                              |                        |             |                          | 0/2014      |
| THESSEE / REGISTRANT INFORMATION/OWNER OF PLATE)  LEGAL STATUS  NAME  NAME  ADDRESS  CITY  STATE  ZIP CODE  NAME  ADDRESS  CITY  STATE  ZIP CODE  VEHICLE COST / TAX.INFORMATION '(required for Title & Registration Transactions)  SALE PRICE  TRADE IN ALLOWANCE  TAXABLE AMOUNT  SALESTAX PAID  "TAX EXEMPTION REASON / SALES TAX \$  DEALER ADDRESS  DEALER #  TRUD DUE TO NON DELIEVERY  ALTERED  LILEGIBLE  LINGE penalties of perjury, I hereby certify all information provided by me or on my behalf.  SIGNATURE OF CERTIFIER/OWNER  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(if APPLICABILE)  DATE  11/24/2014  NOICE NUMBER  COUNTY NAME  CONUMBER DATE OF APPLICATION  33 11/24/2014  W.F. (BILL) KNOWLES  HOMITON Trailor  REGISTRATON FEE  CREDIT  LEASE FEE  TRANS FEE  CLERK FEE  ISSUANCE FEE  ISSUANCE FEE  ISSUANCE FEE  TOTAL TAX COLLECTED  TOTAL TAX COLLECTED |  | Γ 25 FL               |  |                           |                       |   |                 |                  |                              |                        |             |                          |             |
| **LESSEE / REGISTRANT INFORMATION(OWNER OF PLATE)**  **LEASE / REGISTRANT INFORMATION (OWNER OF PLATE)**  **LEASE / REGISTRANT INFORMATION (OWNER OF PLATE)**  **ADDRESS**  **CITY**  **STATE**  **ZIP CODE**  **TAXE EXEMPTION REASON / SALES TAX #*  **DEALER NAME**  **DEALER NAME**  **DEALER NAME**  **DEALER NAME**  **DEALER NAME**  **DEALER NAME**  **DEALER ADDRESS**  **DEALER ADDRESS**  **DEALER ADDRESS**  **DEALER #*  **DEALER #*  **DEALER ADDRESS**  **DEALER #*  **DEA  | LIEN CODE SECOND LIE   | NHOLDER               |  |                           |                       |   |                 |                  |                              |                        |             | LIEN DA                  | ATE         |
| NAME  ADDRESS  CITY  STATE  ZIP CODE  VEHICLE COST / TAX INFORMATION "(required for Title & Registration Transactions)  SALE PRICE  TRADE IN ALLOWANCE  TRADE IN ALLOWANCE  TAXABLE AMOUNT  SALESTAX PAID  TAX EXEMPTION REASON / SALES TAX #  DEALER NAME  DEALER ADDRESS  DEALER #  **Required for Duplicate Title - T.C.A. 55-3-115 (submit lilegible or allered Certificate of Title)  LOST  STOLEN  MUTILATED  MUTILATED  RTND DUE TO NON DELIEVERY  ALTERED  ILLEGIBLE  John provided by me or on my behalf.  SIGNATURE OF CERTIFIER/OWNER  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  11/24/2014  NNOICE NUMBER  COUNTY NAME  CO NUMBER  CONUMBER  DATE  TAXABLE AMOUNT  SALESTAX PAID  TAX EXEMPTION REASON / SALES TAX #  ALTERED  ILLEGIBLE  DATE  11/24/2014  NNOICE NUMBER  CONUMBER  CONUMBER  CONUMBER  CONUMBER  CONUMBER  DATE  11/24/2014  W.F. (BILL) KNOWLES  HCM2  OFFICE USE ONLY  EMISSION: Trailer  CREDIT  CREDIT  LEASE FEE  TRANS FEE  CLERK FEE  TOTAL TAX COLLECTED  TOTAL TAX COLLECTED IN STATE OF  COUNTY WHEEL TAX  CITY STICKER FEE   | TREET  |                       |  | CITY                      |                       |   |                 |                  |                              | STATE ZIP CODE         |             |                          |             |
| NAME  ADDRESS  CITY  STATE  ZIP CODE  VEHICLE COST / TAX INFORMATION "(required for Title & Registration Transactions)  SALE PRICE  TRADE IN ALLOWANCE  TRADE IN ALLOWANCE  TAXABLE AMOUNT  SALESTAX PAID  TAX EXEMPTION REASON / SALES TAX #  DEALER NAME  DEALER ADDRESS  DEALER #  **Required for Duplicate Title - T.C.A. 55-3-115 (submit lilegible or allered Certificate of Title)  LOST  STOLEN  MUTILATED  MUTILATED  RTND DUE TO NON DELIEVERY  ALTERED  ILLEGIBLE  John provided by me or on my behalf.  SIGNATURE OF CERTIFIER/OWNER  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  11/24/2014  NNOICE NUMBER  COUNTY NAME  CO NUMBER  CONUMBER  DATE  TAXABLE AMOUNT  SALESTAX PAID  TAX EXEMPTION REASON / SALES TAX #  ALTERED  ILLEGIBLE  DATE  11/24/2014  NNOICE NUMBER  CONUMBER  CONUMBER  CONUMBER  CONUMBER  CONUMBER  DATE  11/24/2014  W.F. (BILL) KNOWLES  HCM2  OFFICE USE ONLY  EMISSION: Trailer  CREDIT  CREDIT  LEASE FEE  TRANS FEE  CLERK FEE  TOTAL TAX COLLECTED  TOTAL TAX COLLECTED IN STATE OF  COUNTY WHEEL TAX  CITY STICKER FEE   |  |                       |  |                           |                       |   |                 |                  |                              |                        |             |                          |             |
| ADDRESS  CITY  STATE  ZIP CODE  VEHICLE COST / TAX INFORMATION *(required for Title & Registration Transactions)  SALE PRICE  TRADE IN ALLOWANCE  TRADE IN ALLOWANCE  TRADE IN ALLOWANCE  TRADE IN ALLOWANCE  DEALER ADDRESS  DEALER #  DEALER #  DEALER #  DEALER #  TRADE IN ALTERED  ILLEGIBLE  INTO DUE TO NON DELIEVERY  ALTERED  ILLEGIBLE  INTO DUE TO NON DELIEVERY  If a alsa/gnees to deprium, I hereby certify all information provided by me or on my behalf.  SIGNATURE OF CERTIFIER/OWNER  POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  11/24/2014  NOCICE NUMBER  CONTY NAME  CONTY  |  | RMATION(OWNER OF      | PLATE)                                       | LEGAL ST                  | ATUS                  | NAME (  |                 | MAO L IL         | .u 🔲                         |                        |             |                          |             |
| VEHICLE COST / TAX INFORMATION "(required for Title & Registration Transactions)  SALE PRICE  TRADE IN ALLOWANCE  TRADE IN ALLOWANCE  TRADE IN ALLOWANCE  DEALER ADDRESS  DEALER #  TRAGE IN ALLOWANCE  DEALER ADDRESS  DEALER #  TRAGE IN ALLOWANCE  TRAGE IN ALLOWANCE  DEALER ADDRESS  DEALER #  TRAGE IN ALLOWANCE  TRAGE IN ALLOWANCE  DEALER #  TRAGE IN ALLOWANCE  TRAGE IN ALLOWANCE  DEALER #  TRAGE IN TAX EXEMPTION REASON / SALES TAX #  DEALER #  TRAGE IN ALLOWANCE   | 1000500  |                       |  |                           |                       |   |                 |                  |                              | CTATE ZID CODE         |             |                          |             |
| DEALER NAME  DEALER ADDRESS  DEALER #  TRADE IN ALLOWANCE  DEALER ADDRESS  DEALER #  TRAGE IN ALLOWANCE  DEALER ADDRESS  DEALER #  TRAGE IN ALLOWANCE  TRAGE IN ALLOWANCE  DEALER #  TRAGE IN ALLOWANCE  TRAGE IN ALLOWANCE  ALLER #  TRACE IN THE RESPONSIBILITY OF TRAGET IN THE PLICABLE IN THE PLICABLE IN ALLOWANCE IN ALLER IN ALLOWANCE IN ALLOWANCE IN ALLOWANCE IN ALLER IN ALLOWANCE IN ALLER IN ALLOWANCE  | ADDRESS  |                       |  | CITY                      |                       |   |                 |                  |                              | SIATE ZIF CODE         |             |                          |             |
| DEALER NAME  DEALER ADDRESS  DEALER #  *Required for Duplicate Title - T.C.A. 55-3-115 (submit lilegible or altered Certificate of Title)  LOST  STOLEN  MUTILATED  MUTILATED  RTND DUE TO NON DELIEVERY  ALTERED  JULEGIBLE  |  |                       |  | ansactions)               | TAXA                  | RI E AMOUNT                                       |                 | SALESTAX P       | AID                          |                        | *TAX FXFM   | PTION REASON / SALE      | S TAX#      |
| *Required for Duplicate Title - T.C.A. 55-3-115 (submit lilegible or altered Certificate of Title)  LOST STOLEN MUTILATED RIND DUE TO NON DELIEVERY ALTERED ILLEGIBLE  Junder 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 it is 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  11/24/2014  NVOICE NUMBER  CO NUMBER  DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  14328 HAMILTON  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  14328 HAMILTON  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  14328 THOM SIGNATURE (I total fees collected indicated certifies this form as a valid registration)  REGISTRATION FEE  CREDIT  LEASE FEE  TRANS FEE  CLERK FEE  ISSUANCE 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   |  |                       |  | r                         |                       | JEE 7 1111 O 011 1                                |                 | - CALLEGIVE T    |                              |                        | 1701272     |                          |             |
| LOST STOLEN MUTILATED RTN'D DUE TO NON DELIEVERY ALTERED ILLEGIBLE  Jinder 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  prits 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  11/24/2014  NVOICE NUMBER  COUNTY NAME  CO NUMBER DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  14328  HAMILTON  DEFICE USE ONLY  REGISTRATION FEE  CREDIT  LEASE FEE  TRANS FEE  CLERK FEE  SSUANCE FEE  TOTAL TAX COLLECTED  TOTAL TAX COLLECTED  TOTAL TAX COLLECTED  12.00  5.50  .00  COMPUTATION OF  SALES OR USE TAX  SA TAX  LOCAL TAX  ADDITIONAL TAX  COLLECTED IN STATE OF  COUNTY WHEEL TAX  CITY STICKER FEE   | DEALER NAME  |                       |  | DEALER                    | ADDRESS               |   |                 |                  |                              |                        |             | DEALER#                  |             |
| Index 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  11/24/2014  INVOICE NUMBER  COUNTY NAME  CO NUMBER  DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  14328  HAMILTON  OFFICE USE ONLY  REGISTRATION FEE  CREDIT  LEASE FEE  TRANS FEE  CLERK FEE  SSUANCE FEE  ISSUANCE FEE  TOTAL TAX COLLECTED  12.00  5.50  .00  COMPUTATION OF  SALES OR USE TAX  SA TAX  LOCAL TAX  ADDITIONAL TAX  COLLECTED IN STATE OF  COUNTY WHEEL TAX  CITY STICKER FEE  | *Required for Duplicate Title - T.                                 | C.A. 55-3-115 (submit | llegible or altered C                        | ertificate of Title)      | <u> </u>              | _   |                 | 1.2              | _                            |                        | Τ,          |                          |             |
| POWER OF ATTORNEY/AUTHORIZED SIGNATURE(IF APPLICABLE)  DATE  11/24/2014  NVOICE NUMBER  COUNTY NAME  CO NUMBER  DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  14328   | LOST   | STOLEN                |  | MUTILATED                 |                       | RTN   | DUE TO NON D    | ELIEVERY         | AL                           | TERED                  |             | ILLEGIBLE                |             |
| NVOICE NUMBER  COUNTY NAME  CO NUMBER DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  14328  HAMILTON  OFFICE USE ONLY REGISTRATION FEE  CREDIT  REGISTRATION FEE  CREDIT  CREDIT  LEASE FEE  TRANS FEE  CLERK FEE  SSUANCE FEE  SSUANCE FEE  TOTAL TAX COLLECTED  12.00  5.50  .00  COMPUTATION OF  SALES OR USE TAX  SA TAX  LOCAL TAX  ADDITIONAL TAX  COLLECTED IN STATE OF  COUNTY WHEEL TAX  CITY STICKER FEE   |  |                       | provided is true and<br>ation provided by me |                           |                       |   |                 |                  |                              | tor Vehicle Division   |             |                          |             |
| NVOICE NUMBER  COUNTY NAME  CO NUMBER  DATE OF APPLICATION  BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES(COUNTY CLERK)  HAMILTON  OFFICE USE ONLY  REGISTRATION FEE  CREDIT  CR  | SIGNATURE OF CERTIFIER/OV  | WNER                  |  | POV                       | VER OF ATT            | ORNEY/AUTH  | ORIZED SIGNATUR | RE(IF APPLICABLE | Ξ)                           |                        | DATE        | 11/24/2014               | 4           |
| OFFICE USE ONLY REGISTRATION FEE  79.75  COMPUTATION OF  SALES OR USE TAX  SA TAX  LOCAL TAX  ADDITIONAL TAX  COLLECTED IN STATE OF  COUNTY WHEEL TAX  CITY STICKER FEE  CITY STICKER FEE  COUNTY WHEEL TAX  CITY STICKER FEE   | NVOICE NUMBER  | COUNTY NAME           |  | CON                       | UMBER                 | DATE OF AP  | PLICATION       | BY AUTHO         | RITY OF RE                   | GISTRAR OF MOT         | OR VEHICLES |                          | -           |
| REGISTRATION FEE CREDIT LEASE FEE TRANS FEE CLERK FEE ISSUANCE FEE TOTAL TAX COLLECTED  |  |                       | 7.7.   |                           | 33                    | 11/   | 24/2014         |                  |                              |                        |             |                          | ICM27       |
| COMPUTATION OF SALES OR USE TAX SA TAX LOCAL TAX ADDITIONAL TAX COLLECTED IN STATE OF COUNTY WHEEL TAX CITY STICKER FEE   | REGISTRATION FEE   |                       | LEASE F                                      | EE                        | TRA                   | ANS FEE   | CLERK FEE       | ISSUANCE         | FEE TIT                      | LE FEE                 | TOTA        | L TAX COLLECTED          |             |
| SALES TAX USE TAX   |  | SALES OR USE TAX      | SA TAX                                       | LOCAL                     | TAX A                 | DDITIONAL TA                                      | x   COL         |                  |                              |                        | 1           |                          |             |
| *SERVICE OPT FEE ORGAN DONOR POSTAGE VER ID/RESIDENCY VERIFICATION *TOTAL FEES COLLECTED  | SALES TAX USE TAX *SERVICE OPT FEE                                 |                       | POSTAG                                       | BE                        | VER                   |   | ID / RESIDENC   | Y VERIFICATION   |                              |                        | *TOTA       | AL FEES COLLECTED        |             |
| 97.25  Port: wk48/DR27/8020 Cash: 0.00 Check: 0.00 Check#: Credit: 0.00 Auth#: Change: 0.00 RDA-692   |  |                       |  |                           |                       |   |                 |                  |                              |                        |             |                          |             |