



OFFICIAL VEHICLE REGISTRATION

913973

City Stickers:

NEW OR CURRENT TITLE NUMBER	TRANSACTION CODE 001	REGISTRATION ONLY NUMBER
-----------------------------	--------------------------------	--------------------------

90494960

OWNER INFORMATION *LEGAL STATUS: 1 (AND) 2 (OR) <input type="checkbox"/> ENTER NAME CODE IN BOX 1 (SAME) 2 (DIFFERENT) 3 (MULTIPLE LAST NAMES) 4 (COMPANY) 5 (OVER 28 CHARACTERS) 4		MAO <input checked="" type="checkbox"/> N ILU <input checked="" type="checkbox"/> N
--	--	---

ST NAME	FIRST NAME	MIDDLE INITIAL	LAST NAME	FIRST NAME	MIDDLE INITIAL
---------	------------	----------------	-----------	------------	----------------

BOWMAN TRAILER LEASING LLC

ADDRESS 1 (MAILING)	ADDRESS 2 (PHYSICAL)
---------------------	----------------------

10233 GOVERNOR LN BLVD

CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
------	-------	----------	------	-------	----------

WILLIAMSPORT

MD

21795

DATE OF RESIDENCE/PRINCIPAL BUS OR INCORP LOCATION	PURCHASE DATE	*LEASED <input checked="" type="checkbox"/> *SERVICE OPTIONS <input type="checkbox"/> SEE REVERSE SIDE FOR INSTRUCTIONS	TELEPHONE #	*PLACARD/HEARING IMPAIRED CLS/YR	*INSURANCE POLICY #
--	---------------	--	-------------	----------------------------------	---------------------

HAMILTON 033

06/29/2012

301 582 1793

Vehicle Information

VIN	MAKE	MODEL	YEAR	BODY	TITLE BRAND - translation	CODE	TYPE OF FUEL - translation	CODE
-----	------	-------	------	------	---------------------------	------	----------------------------	------

1GRAA06296B706672

GDAN

1GR

2006

SE

USED

U

9

PREVIOUS TITLE #	STATE	PREVIOUS STATES TITLED	VEHICLE USE	VEHICLE TYPE	CURRENT MILEAGE	ODOMETER ACTUAL (8) NOT ACTUAL (8) INDICATOR OVER 10 YRS / 16,000 LBS (1) (List one) IN EXCESS OF MECHANICAL LIMITS (9)	CODE
------------------	-------	------------------------	-------------	--------------	-----------------	---	------

72831475

TN

TN

F

S

1

FOR CODE (enter appropriate code)* *LOWER	MOBILE HOME LGTH WIDTH	# AXLES	GROSS VEHICLE WEIGHT	*VEHICLE TRADE-IN DESCRIPTION	COMPANY VEHICLE #
--	---------------------------	---------	----------------------	-------------------------------	-------------------

0

913973

Plate Information * (required for Title and Registration and Registration Only Transactions) SEE REVERSE SIDE FOR COMPLETE INSTRUCTIONS

PLATE # (1)	CLASSCODE/ISSUE YR (1)(3)	VALIDATION # (1)	COUNTY STICKER # (1)	CITY STICKER # (1)(2)	*PLATE # (TRADE IN) (2)	CLASS CODE/ISSUE YR (2)	EXPIRATION DATE (1)(2)(3)
-------------	---------------------------	------------------	----------------------	-----------------------	-------------------------	-------------------------	---------------------------

UJ999258

8020/1994

PERMANENT

R STICKER # (4)	TEMP OPERATOR PERMIT # (3)	# OF SEATS (5)	ZONE (COUNTY NAME) (6)	USDOT / REGISTRANT # (7)	MOTOR CARRIER # (8)
-----------------	----------------------------	----------------	------------------------	--------------------------	---------------------

Lien Information (if lien present)

LIEN CODE	FIRST LIENHOLDER	LIEN DATE
-----------	------------------	-----------

SUNTRUST BANK

06/29/2012

REET	CITY	STATE	ZIP CODE
------	------	-------	----------

120 E BALTIMORE ST 25 FL

BALTIMORE

MD

21202

LIEN CODE	SECOND LIENHOLDER	LIEN DATE
-----------	-------------------	-----------

REET	CITY	STATE	ZIP CODE
------	------	-------	----------

ISSUE / REGISTRANT INFORMATION (OWNER OF PLATE)	LEGAL STATUS <input type="checkbox"/>	NAME CODE <input type="checkbox"/>	MAO <input type="checkbox"/>	ILU <input type="checkbox"/>
---	---------------------------------------	------------------------------------	------------------------------	------------------------------

NAME	NAME
------	------

ADDRESS	CITY	STATE	ZIP CODE
---------	------	-------	----------

Vehicle Cost / Tax Information * (required for Title & Registration Transactions)

LE PRICE	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 if stolen or altered Certificate of Title)

<input type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> MUTILATED	<input type="checkbox"/> RTND DUE TO NON DELIVERY	<input type="checkbox"/> ALTERED	<input type="checkbox"/> ILLEGIBLE
-------------------------------	---------------------------------	------------------------------------	---	----------------------------------	------------------------------------

I, the undersigned, for 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 to 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
------------------------------	--	------

10/17/2012

VOICE NUMBER	COUNTY NAME	CO NUMBER	DATE OF APPLICATION	BY AUTHORITY OF REGISTRAR OF MOTOR VEHICLES (COUNTY CLERK)
--------------	-------------	-----------	---------------------	--

12291 @

HAMILTON

33

10/17/2012

W.F. (BILL) KNOWLES

KAR46

REGISTRATION FEE	CREDIT	LEASE FEE	TRANS FEE	CLERK FEE	ISSUANCE FEE	TITLE FEE	TOTAL TAX COLLECTED
------------------	--------	-----------	-----------	-----------	--------------	-----------	---------------------

79.75

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
----------------	------------------	--------	-----------	----------------	-----------------------	------------------	------------------

SERVICE OPT FEE	ORGAN DONOR	POSTAGE	VER	ID / RESIDENCY VERIFICATION	*TOTAL FEES COLLECTED
-----------------	-------------	---------	-----	-----------------------------	-----------------------

97.25