OFFICIAL VEHICLE REGISTRATION

City Stickers:											-	915	342
NEW OR CURRENT TITLE NU 90487107	MBER				TE	ODE OD1	REG	SISTRATION ONLY	NUMBER				21
OWNER INFORMATION *LEG	AL STATUS: 1 (AND) 2	(OR) EN	NTER NAME	E CODE IN	BOX 1 (SAM	E) 2(DIFFERE	NT) 3/MULTIPLE I	AST NAMES) 4(C	OMPANY)	5(OVER 28 CHARACTE	(RS) 4	MAO N ILU	N
LAST NAME BOWMAN TRA		FINST IVAIVI	_	М	IDDLE INITIA	L	LAST NAME			FIRST NAME		MIDDLE INITIA	
ADDRESS 1 (MAILING)							ADDRESS 2 (PH	YSICAL)					
10233 GOVERI	NOR LN BLV		STATE		ZIP CODE		CITY			STA	ATE	ZIP CODE	
WILLIAMSPOR	RT		MD		21795		COSAIL PO				-		
HAMILTON 03		06/29			D SER	VICE OPTION	30	1 582 179		ARD/HEARING IMPAIRE	ED CLS/YR	*INSURANCE POLICY	#
VEHICLE INFORMATION		LMAKE		ODEL	YEAR	BODY	TITLE BRAND	translation		CODE	TYPE OF FUE	1 - translation	CODE
1GRAA06296T	E22404	MAKE GDA		1GR	2006	SE		- translation		U	111 2 01 102	L da oldoo	9
SURRENDERED TITLE #	332404	STATE	PREVIOUS			VEHICLE U	USED VEHICLE T	TYPE CURRE	NT MILEA	GE ODOMETER	ACTUAL (0) NO	OT ACTUAL (8)	CODE
73898797		TN	TN TN			F	s		(List one) IN		N EXCESS OF M	OVER 10 YRS / 16,000 LBS (1) EXCESS OF MECHANICAL LIMITS (9)	
COLOR CODE (enter appropriate UPPER LOWER		OME WDTH		# AXLES	GRO	OSS VEHICLE	WEIGHT	*VEHICLE	E TRADE-IN	DESCRIPTION		COMPANY VEHICLE #	5342
PLATE INFORMATION *(requi	red for Title and Registr	ation and Red			tions) SEE RE	VERSE SIDE	FOR COMPLETE	INSTRUCTIONS	ADE INVO	CLASS CODE/IS	SCITE VD(a)	EXPIRATION DATE	(1)(2)(3)
PLATE #(1) CL. U383347	ASSCODE/ISSUEYR(1) 8020/199		DATION #(1)) CC	DUNTY STICK	ER #(1) CI	TY STICKER #(1)(2) PLATE #(TR	ADE IN)(2)	CLASS CODE/IS	SSUE TH(2)	PERM	
TDR STICKER #(4)				ZONE(CO	OUNTY NAME)	(6) USDOT / REGISTR		STRANT #(ANT #(7)		MOTOR CARRIER #(8)		
LIEN INFORMATION (If lien p	resent)				alter all a								
LIEN CODE FIRST LIEN	HOLDER											LIEN DA	9/2012
St	JNTRUST BA	7NK										1116/2	
CTREET	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11111					CITY			STAT	E .	ZIP CODE	9/2012
	ALTIMORE S		<u> </u>				BALT	IMORE			E MD	ZIP CODE 21202	
120 E BA			<u> </u>					IMORE				ZIP CODE	
120 E BA	ALTIMORE S		L					TIMORE			MD	ZIP CODE 21202	
120 E BA LIEN CODE SECOND L STREET	ALTIMORE S	T 25 Fl	L	150416	TATIO .) NAME	CITY		111		MD	ZIP CODE 21202 LIEN DA	
120 E BA	ALTIMORE S	T 25 Fl	L	LEGAL S	STATUS	NAME	BAL1	MAO MAO	ILU 🔲		MD	ZIP CODE 21202 LIEN DA	
120 E BA LIEN CODE SECOND L STREET *LESSEE/REGISTRANT INF	ALTIMORE S	T 25 Fl		LEGAL S	STATUS		CITY		ILU 🗌		MD E	ZIP CODE 21202 LIEN DA	ATE
120 E BA LIEN CODE SECOND L STREET *LESSEE / REGISTRANT INF NAME ADDRESS	ALTIMORE S JENHOLDER ORMATION(OWNER O	T 25 FI			STATUS		CODE NAME		ILU 🗌	STAT	MD E	ZIP CODE 21202 LIEN DA ZIP CODE	ATE
120 E BA LIEN CODE SECOND L STREET *LESSEE / REGISTRANT INF. NAME	ALTIMORE S JENHOLDER ORMATION(OWNER O	T 25 FI					CODE NAME			STAT	MD E	ZIP CODE 21202 LIEN DA ZIP CODE	NTE
120 E BA LIEN CODE SECOND L STREET **LESSEE / REGISTRANT INF NAME ADDRESS VEHICLE COST / TAX INFOR	ALTIMORE S IENHOLDER ORMATION(OWNER O	T 25 FI		actions)		C	CODE NAME	мао		STAT	MD TE TAX EXEM	ZIP CODE 21202 LIEN DA ZIP CODE	NTE
120 E BA LIEN CODE SECOND L STREET *LESSEE / REGISTRANT INF NAME ADDRESS VEHICLE COST / TAX INFOR SALE PRICE	ALTIMORE S JENHOLDER ORMATION(OWNER O	T 25 FI	ration Trans	actions)	TAXA ER ADDRESS	C	CODE NAME	мао		STAT	MD TE TAX EXEM	ZIP CODE 21202 LIEN DA ZIP CODE ZIP CODE	NTE
TLESSEE / REGISTRANT INF NAME ADDRESS VEHICLE COST / TAX INFOR SALE PRICE *Required for Duplicate Title - LOST	ORMATION (OWNER OF TRADE IN AL	T 25 FI	altered Certif	DEALI	TAXAER ADDRESS	C ABLE AMOUNT R	CODE NAME	MAO SALESTAX	X PAID	STAT	TE TAX EXEM	ZIP CODE 21202 LIEN DA ZIP CODE ZIP CODE	NTE
TLESSEE / REGISTRANT INFORSALE PRICE DEALER NAME *Required for Duplicate Title - LOST Under penalties of perjury, I her its assignees to determine it	ORMATION '(required for TRADE IN AL	T 25 FI	altered Certif	DEALI	ER ADDRESS le) D a best of my kealf.	C ABLE AMOUNT R nowledge, and	CODE NAME ITY TO DUE TO NON acknowledge that	SALESTAX N DELIEVERY it is not the response	(PAID	STAT	TE TAX EXEM	ZIP CODE 21202 LIEN DA ZIP CODE ZIP CODE ZIP CODE	NTE
TLESSEE / REGISTRANT INF NAME ADDRESS VEHICLE COST / TAX INFOR SALE PRICE *Required for Duplicate Title - LOST	ORMATION '(required for TRADE IN AL	T 25 FI	altered Certif	DEALI	ER ADDRESS le) D a best of my kealf.	C ABLE AMOUNT R nowledge, and	CODE NAME	SALESTAX N DELIEVERY it is not the response	(PAID	STAT	TE TAX EXEM	ZIP CODE 21202 LIEN DA ZIP CODE ZIP CODE ZIP CODE	STAX#
TLESSEE / REGISTRANT INFORMALE ADDRESS VEHICLE COST / TAX INFORMALE PRICE DEALER NAME *Required for Duplicate Title - LOST Under penalties of perjury, I he or its assignees to determine it	ORMATION (OWNER OF TRADE IN ALTIMORE STOLEN T.C.A. 55-3-115 (submit STOLEN TOUR S	T 25 FI	altered Certif	DEALI	TAXA ER ADDRESS le) D a best of my kall. OWER OF AT	ABLE AMOUNTS R: nowledge, and TORNEY/AUT	CITY CODE NAME ITY IN'D DUE TO NON acknowledge that in the control of the cont	SALESTAX IN DELIEVERY It is not the response TURE(IF APPLICAL BY AUT	(PAID Sibility of the BLE)	STAT STAT STAT ALTERED Motor Vehicle Division FREGISTRAR OF MOT	TE TAX EXEM	ZIP CODE 21202 LIEN DA ZIP CODE ZIP CODE ZIP CODE ZIP CODE DEALER # LLEGIBLE 09/19/201: SICOUNTY CLERK)	STAX#
TLESSEE / REGISTRANT INFORMANE ADDRESS VEHICLE COST / TAX INFORMANE ADDRESS VEHICLE COST / TAX INFORMANE TREQUIRED for Duplicate Title LOST Under penalties of perjury, I have rite assignees to determine the rite assignees	ORMATION (OWNER OF TRADE IN ALTIMORE STOLEN TO A SS-3-115 (submit stolen accuracy of the information of the	T 25 FI	altered Certif	DEALI	TAXA ER ADDRESS le) D a best of my kindle. OWER OF AT	ABLE AMOUNTS R: nowledge, and TORNEY/AUT	CODE NAME ITY TN'D DUE TO NON acknowledge that it	SALESTAX I DELIEVERY It is not the respons TURE(IF APPLICAL BY AUTI W.F (total for	(PAID sibility of the BLE) HORITY OF . (BILI ees collected)	STAT STAT STAT ALTERED Motor Vehicle Division FREGISTRAR OF MOT NOWLES ed Indicated certifies to	TE TAX EXEM	ZIP CODE 21202 LIEN DA ZIP CODE	STAX#
TLESSEE / REGISTRANT INFORMAL PRICE DEALER NAME *Required for Duplicate Title - Under penalties of perjury, I he or its assignees to determine it SIGNATURE OF CERTIFIER/ INVOICE NUMBER 12263 @ OFFICE USE ONLY REGISTRATION FEE	ORMATION (OWNER OF TRADE IN ALTIMORE STOLEN T.C.A. 55-3-115 (submit STOLEN TOUR S	T 25 FI F PLATE) Title & Regist LOWANCE It illegible or a	altered Certif	DEALI	ER ADDRESS (e) D a best of my kr aff. OWER OF AT	ABLE AMOUNTS R: nowledge, and TORNEY/AUT	CITY CODE NAME ITY IN'D DUE TO NON acknowledge that in the control of the cont	SALESTAX I DELIEVERY It is not the respons TURE(IF APPLICAL BY AUTI W.F (total for	sibility of the BLE) HORITY OF (BILL ees collect CE FEE	STAT STAT ALTERED Motor Vehicle Division REGISTRAR OF MOT NNOWLES	TE TAX EXEM	ZIP CODE 21202 LIEN DA ZIP CODE Z	STAX#
TLESSEE / REGISTRANT INFORMAL ADDRESS VEHICLE COST / TAX INFORMAL ADDRESS ADD	ORMATION (OWNER OF TRADE IN ALL T.C.A. 55-3-115 (submit trade of the information owner) COUNTY NAME HAMILTO EMISSION: CREDIT SALES OR USE TA	T 25 FI F PLATE) Title & Regist LOWANCE It illegible or a purpovided is altern provided.	ultered Certif	DEALIST DEALIS	TAXA ER ADDRESS (e) D E best of my kr all. OWER OF AT D NUMBER 33	ABLE AMOUNTS RT nowledge, and TORNEY/AUT DATE OF A	CODE NAME ITY TO DUE TO NON acknowledge that it HORIZED SIGNAT PPLICATION 0/19/2012 CLERK FEE	SALESTAX IN DELIEVERY It is not the response to the response	(PAID sibility of the BLE) HORITY OF (BILL ees collection of the CE FEE OO	STAT STAT STAT ALTERED Motor Vehicle Division REGISTRAR OF MOT NNOWLES ed Indicated certifies to	DATE OR VEHICLES his form as a v TOTA .0	ZIP CODE 21202 LIEN DA ZIP CODE Z	STAX#
TLESSEE / REGISTRANT INFORMAL STREET *LESSEE / REGISTRANT INFORMAL SALE PRICE DEALER NAME *Required for Duplicale Title - Under penalties of perjury, I he or its assignees to determine it SIGNATURE OF CERTIFIER/ INVOICE NUMBER 12263 @ OFFICE USE ONLY REGISTRATION FEE 79.75	ORMATION (OWNER OF TRADE IN ALL T.C.A. 55-3-115 (submit trade of the information owner) COUNTY NAME HAMILTO EMISSION: CREDIT SALES OR USE TA	T 25 FI FPLATE) Title & Regist LOWANCE It illegible or a on provided is nation provide ON Trailer	ultered Certif	DEALIST DEALIS	ER ADDRESS (e) D a best of my kr all. OWER OF AT D NUMBER 33	ABLE AMOUNT ABLE AMOUNT ABLE AMOUNT ATTORNEY/AUT DATE OF ATTORNEY/AUT OS RANS FEE	CODE NAME ITY TO DUE TO NON acknowledge that it HORIZED SIGNAT PPLICATION D/19/2012 CLERK FEE	SALESTAX IN DELIEVERY It is not the responsiture (IF APPLICAL BY AUTI W.F. (total for ISSUANCE 12.	sibility of the BLE) HORITY OF (BILL ees collect CE FEE OO ATE OF	STAT STAT STAT ALTERED Motor Vehicle Division REGISTRAR OF MOT L) KNOWLES ed Indicated certifies II TITLE FEE 5.50	DATE OR VEHICLES his form as a v TOTA O CITY:	ZIP CODE 21202 LIEN DA ZIP CODE Z	STAX#