

CALIFORNIA

TRAILER

REGISTRATION EXPIRES

TYPE

LICENSE NUMBER

01/31/90 41

1UP3446

1910216893700978000040200 * 000441

VEH. ID'

NY2C452XJL008145

KE

MO

BERTO UB

YEAR MODEL SHOWN IS BASED ON MANUFACTURER AND DEALER REPRESENTATION

BODY TYPE MODEL

CYLS.

DATE FIRST SOLD

CLASS

*YR.

CARRIER

00/00/88 BQ

88 43W 0

DATE ISSUED

02/27/89

UNLADEN

WEIGHT

AX

WC

G

07500

TOTAL FEES
\$402

	100S
	HUNDREDS
	REG
	ISTER
	DOWN
	THOUSANDS
NOTE: Upon transfer or sale, seller must enter odometer reading here.	LIE N H O L D E R

MILES LSG INC

1900 5

400 OCEANGATE STE 1200

WF

LONG BEACH CA 90802

RF

1. *Diane Patterson 9/26/08* SIGNATURE (S) RELEASES INTEREST IN VEHICLE (DATE)

LF

R UPON SALE, SELLER MUST SUBMIT NOTICE OF TRANSFER (REG. 138)

PEN

NYKZ 618285

01

LIENHOLDER

02

LIENHOLDER

03

LIENHOLDER

04

LIENHOLDER

05

JU

RT

CLK

UT

TOT

1722924

2.

SIGNATURE (S) RELEASES INTEREST IN VEHICLE DATE

IMPORTANT READ CAREFULLY: ANY CHANGE OF REGISTERED OR LEGAL OWNER MUST BE RECORDED WITH THE DEPARTMENT WITHIN 10 DAYS. THIS CERTIFICATE, THE LATEST REGISTRATION CARD AND TRANSFER FEE MUST BE PRESENTED TO THE DEPARTMENT TO RECORD THE TRANSFER OF OWNERSHIP.

DEALERS RELEASE OF ACQUIRED VEHICLE

DEALER(S) NAME(S) OF DEALER(S) AND SIGNATURE OF PERSON SIGNING FOR DEALER
DEALER NO. RELEASE DATE
D A N L E Y 3.
R 4.

APPLICATION FOR TRANSFER OF NEW OWNER(S)

(Please type or print)

I/WE REQUEST NEW REGISTRATION AND OWNERSHIP CERTIFICATES TO BE ISSUED AS FOLLOWS

NEW REGIS- TERED OWNER	TRUE NAME(S) OF NEW REGISTERED OWNER(S)			PURCHASE DATE	
	LAST	FIRST	MIDDLE		
5. A.	AND <input type="checkbox"/>	LAST	FIRST	MIDDLE	PURCHASE PRICE
B.	OR <input type="checkbox"/>				
6. STREET OR P.O. BOX ADDRESS					
6. CITY		STATE		ZIP CODE	COUNTY CODE
7. SIGNATURE(S) OF NEW REGISTERED OWNER(S)					
7. A.					
B.					
NAME OF NEW LIENHOLDER, FIRM OR INDIVIDUAL (LEGAL OWNER OR MORTGAGEE) DO NOT ENTER NAME OF REGISTERED OWNER(S) ABOVE.					
8. NEW LIEN- HOLDER	STREET OR P.O. BOX ADDRESS		CITY	STATE	ZIP CODE
9.					
10. ADDRESS OF NEW LESSEE IF DIFFERENT FROM LINE 6 ABOVE (WILL NOT BE PRINTED ON CERTIFICATE OF TITLE)					
10. OF NEW LESSEE	STREET OR P.O. BOX ADDRESS		CITY	STATE	ZIP CODE