



# Motor Vehicle Commission

## FINANCING STATEMENT

**Please Print or Type Information**

Fee: \$40.00

(Original New Jersey Title Must Accompany this Application)

I hereby certify that I have entered into a security agreement affecting the article described below, with

SAF2343243	MUTUAL CREDIT
Driver License Number or Corpcode (Lienholder)	(NAME OF LIENHOLDER)
134 FRANKLIN BLVD, ADDD	SHELTON CITY GA 45666
Address	City State Zip Code

Dated \_\_\_\_\_

Make of Vehicle	Year	Body Type
7777765554444		
Identification Number	Model	

This Statement is presented to the Chief Administrator of the Motor Vehicle Commission of the State of New Jersey together with Certificate of Ownership No. \_\_\_\_\_ pursuant to R.S. 39:10-11C as amended.

Driver License Number or Corpcode (Owner)	Signature of Owner
DEDDE	
Name of Owner (Print)	
Address	City State Zip Code

Date \_\_\_\_\_

Unless this statement, with the certificate of ownership for the article, is presented to the Chief Administrator of the New Jersey Motor Vehicle Commission, or his/her agent, for filing, there shall be the same result of failure to file as provided in Chapter 9 of Title 12A of the New Jersey Statutes.