

## FINANCING STATEMENT

## **Please Print or Type Information**

Fee: \$40.00

(Original New Jersey Title Must Accompany this Application)

hereby certify that I have enter	red into a se	ecurity agi	eemen	t affectir	ng the article d	escribed belo	ow, with
	NONE						
Driver License Number or Corpcode (Lienh	(NAME OF LIENHOLDER)					,	
Address		City			State	Zip Code	
Dated							
Make of Vehicle	Year	П	Y	E	Body Type		
Identification Number		Model					
This Statement is presented to t New Jersey together with Certifi					hicle Commiss rsuant to R.S. 3		
6767676766							
<b>Driver License Number or Corpcode (Own</b>	ner)				Signature	of Owner	
TESTCOMPANY							
Name of Owner (Print)							
Address		City		- Hill -	State	Zip Code	
Date		<del>_</del> ×					

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.

OS/SS-85C (R5/05)