



CERTIFICATE OF REGISTRATION

M.G.L. Chapter 90 Section 24B makes it a crime to alter this Certificate

RMV Division

PLATE TYPE PAN	REGISTRATION NUMBER 3VVV20	REGISTRATION TYPE PASSENGER	EFFECTIVE DATE 12/21/2012	EXPIRES LAST DAY OF	MONTH 10	YEAR 14	TRANSACTION NUMBER 402330501310306	
MFRS MODEL YEAR 1999	MAKE NISS	MODEL MAXIMA	BODY STYLE /TYPE SEDAN	COLOR GRAY	Not valid without official signature of Registrar		IF VEHICLE CARRYING PASSENGERS FOR HIRE: MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED.	
VEHICLE IDENTIFICATION NUMBER JN1CA21D1XT816203		INSURANCE COMPANY LIBERTY MUTUAL	TITLE NUMBER BL958341		REGISTRAR <i>Rachel Kaprielian</i>	TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER.		
RESIDENTIAL ADDRESS (IF DIFFERENT)								
NAME(S) OF OWNER(S) AND MAILING ADDRESS VIKAS, VISHESH 140 HURON AVE APT 10 CAMBRIDGE, MA 02138					FEES			
					REGISTRATION 25.00			
					TITLE 0.00			
					SPECIAL PLATES 0.00			
					SALES TAX 0.00			
					TOTAL		25.00	
MASSACHUSETTS DEPARTMENT OF TRANSPORTATION REGISTER OF MOTOR VEHICLES DIVISION								
The records of the RMV database constitute the official status of the vehicle registration.								
SPECIAL MESSAGE			CHANGE OF ADDRESS					
IF THIS VEHICLE IS NEWLY ACQUIRED, IT MUST BE INSPECTED WITHIN SEVEN (7) DAYS OF REGISTRATION.			<p>STREET ADDRESS</p> <hr/> <hr/> <p>CITY, STATE, ZIP CODE</p>					

Important information for Vehicle Owners

- Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and for the trailer, if any, and his/her license to operate, upon his/her person or in the vehicle, in some easily accessible place.
- By law, you must report any change of address to the RMV within 30 days in writing. Address changes can be made on the RMV website: www.massrmv.com or by mail to: RMV, P.O. Box 55889, Boston, MA 02205-5889. Once you have reported the address change to the RMV, please write corrected address in box provided above.

- Return the registration plates to the RMV immediately if:
 - The Vehicle has been sold or junked and the registration is not going to be transferred to another vehicle. Keep a copy of the *Bill of Sale*, *Title*, and completed *Reassignment of Title* for your records to document the transfer.
 - You move to another state and you register the vehicle in that state.
 - The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy.

Transferring Your Plates: Massachusetts law (G.L. Chapter 90, Section 2) allows you to transfer valid registration plates from this vehicle to a newly acquired new or used motor vehicle or trailer while you obtain insurance and a new registration. All of the following must be met: 1. You are at least 18 years of age and you own the motor vehicle or trailer identified on this Registration Certificate; 2. You transfer ownership of this vehicle to another person or permanently lose possession of it (such as through repossession, etc.); 3. The newly acquired vehicle is of the same vehicle type (passenger vehicle to passenger vehicle, trailer to trailer, etc.); the same registration type (passenger to passenger, commercial to commercial); and has the same number of wheels; and 4. The seller and buyer properly complete the Assignment of the Certificate of Title (for the newly acquired "used" vehicle) or Certificate of Origin (if a "new" vehicle). If all of the above are met, you may operate the newly acquired vehicle with the transferred plates up to 5:00 pm of the 7th calendar day following the date of transfer (or loss of possession). The day of transfer or loss is day #1. During those 7 days, you must carry the Bill of Sale (or the dealer's Purchase Contract) for the newly acquired vehicle and this Registration Certificate when operating the Vehicle. See *FAQs About the Seven-Day Registration Transfer Law* on the RMV's website at www.massrmv.com

No Insurance Card Required: Massachusetts law does not require an insurance card. The law, M.G.L. Chapter 90, Section 34A and Chapter 175, Section 113A requires the vehicle's owner to maintain a compulsory motor vehicle liability insurance policy or bond for bodily injury coverage and property damage insurance. If an insurer is identified on the face of this Registration Certificate, it is required by law to electronically notify the RMV (Registry of Motor Vehicles) if coverage lapses. The vehicle owner is then notified by the RMV to obtain new insurance within 10 days or the registration will be revoked. Bonds are filed with the State Treasurer's Office.

BE FIRST IN LINE BY GOING ONLINE AT WWW.MASSRMV.COM

Schedule a Road Test
Renew Your Driver's License
Renew Your Registration
Pay Citations/Court Hearing Fee
Replace Your Driver's License

Request a Duplicate Title
Request a Duplicate Registration
Change Your Address
Cancel My Plate/Registration
Order a Special Plate

NEED TO VISIT AN RMV OFFICE?
SAVE TIME
Complete Your
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VISIT OUR WEBSITE FOR A FULL LIST OF AVAILABLE TRANSACTIONS



CERTIFICATE OF REGISTRATION

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PLATE TYPE PAN	REGISTRATION NUMBER 3 VVV20	REGISTRATION TYPE PASSENGER	EFFECTIVE DATE 11/01/14	EXPIRES LAST DAY OF →	MONTH 10	YEAR 16	TRANSACTION NUMBER 02428101290131
MFNS MODEL YEAR 1999	MAKE NISS	MODEL MAXIMA	BODY STYLE/TYPE SEDAN	COLOR GRAY	Not valid without official signature of Registrar <i>Celia J. Blue</i>		IF VEHICLE CARRYING PASSENGERS FOR HIRE; MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED.
VEHICLE IDENTIFICATION NUMBER JN1CA21D1XT816203		INSURANCE COMPANY LIBERTY MUTUAL INS		TITLE NUMBER BL958341	REGISTRAR		TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER.
RESIDENTIAL ADDRESS (IF DIFFERENT)							
NAME(S) OF OWNER(S) AND MAILING ADDRESS *****AUTO***3-DIGIT 021 VIKAS, VISHESH 258 HARVARD ST APT 7 CAMBRIDGE MA 02139-2525							FEES REGISTRATION 60.00 TITLE 0.00 SPECIAL PLATES 0.00 SALES TAX 0.00 TOTAL 60.00

MASSACHUSETTS DEPARTMENT OF TRANSPORTATION REGISTRY OF MOTOR VEHICLES DIVISION

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SPECIAL MESSAGE IF THIS VEHICLE IS NEWLY ACQUIRED, IT MUST BE INSPECTED WITHIN SEVEN (7) DAYS OF REGISTRATION.	CHANGE OF ADDRESS STREET ADDRESS CITY, STATE, ZIP CODE
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Important Information for Vehicle Owners

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|---|--|
| <ul style="list-style-type: none"> Every person operating a motor vehicle shall have the Certificate of Registration for the motor vehicle and for the trailer, if any, and his/her license to operate, upon his/her person or in the vehicle, in some easily accessible place. By law, you must report any change of address to the RMV within 30 days in writing. Address changes can be made on the RMV website: www.massrmv.com or by mail to: RMV, P.O. Box 55889, Boston, MA 02205-5889. Once you have reported the address change to the RMV, please write corrected address in box provided above. | <ul style="list-style-type: none"> Return the registration plates to the RMV immediately if: <ul style="list-style-type: none"> The vehicle has been sold or junked and the registration is not going to be transferred to another vehicle. Keep a copy of the Bill of Sale, Title, and completed Reassignment of Title for your records to document the transfer. You move to another state and you register the vehicle in that state. The insurance policy is not renewed or is cancelled and there is no plan to obtain a new policy. |
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- | | |
|---------------------------------|----------------------------------|
| Schedule a Road Test | Request a Duplicate Title |
| Renew Your Driver's License | Request a Duplicate Registration |
| Renew Your Registration | Change Your Address |
| Pay Citations/Court Hearing Fee | Cancel My Plate/Registration |
| Replace Your Driver's License | Order a Special Plate |

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Complete Your
Application Online!

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DONATION RECEIPT**Thank you for donating to:**

WBUR

Stock Number
BUR15-10-10

NEI402958

This confirms the pick up of your vehicle/vessel donation.**Donation Date:** 10/27/2015**Phone Number:** (781) 866-0806**Donor Name:** VISHESH VIKAS**Mailing Address:** 258 HARVARD ST APT 7, CAMBRIDGE, MA 02139**Pickup Location:** 200 BOSTON AVE, MEDFORD, MA 02155**Year:** 1999**License:****Make:** NISSAN**Model:** MAXIMA**VIN/Hull #:** JN1CA21D1XT816203**Odometer:** 200000Check if donated vehicle is: Drivable Not Drivable

Please retain this document for your records. Your vehicle donation may be tax deductible. Please consult your tax advisor if you have questions or visit the IRS website, www.irs.gov.

Additional documents will be mailed to you upon the completion of your vehicle sale. These documents will be necessary to determine the amount of your tax deduction, if any.

In the rare event that you receive any notification of a lien sale or other activity related to your donated vehicle, please phone 877-537-5277 immediately for assistance.

If you have any other questions regarding your vehicle donation, please do not hesitate to call us.

Thank you again for your support and generosity.

***Please contact the Department of Motor Vehicles in your state
to report that you are no longer in possession of vehicle.***

Please contact us if you have any questions about your donation.
Car Donating Is Easy (877) 537-5277
4669 Murphy Canyon Road, Suite 100, San Diego, CA 92123



PLATE RETURN RECEIPT

RMV Division

PLATE TYPE PAN	REGISTRATION NUMBER 3VVV20	REGISTRATION TYPE PASSENGER	EFFECTIVE DATE 11/20/15	EXPIRES LAST DAY OF → 10 16	MONTH 10	YEAR 16	TRANSACTION NUMBER 03532406160118
MFNS MODEL YEAR 1999	MAKE NISS	MODEL MAXIMA	BODY STYLE/TYPE SEDAN	COLOR GRAY	Not valid without official signature of Registrar		IF VEHICLE CARRYING PASSENGERS FOR HIRE: MAXIMUM NUMBER OF PASSENGERS THAT CAN BE SEATED.
VEHICLE IDENTIFICATION NUMBER JN1CA21D1XT816203		INSURANCE COMPANY LIBERTY MUTUAL INS		TITLE NUMBER BL958341	REGISTRAR <i>Cher C. Devaney</i>	TOTAL REGISTERED WEIGHT FOR A COMMERCIAL VEHICLE OR TRAILER.	
RESIDENTIAL ADDRESS (IF DIFFERENT)							
NAME(S) OF OWNER(S) AND MAILING ADDRESS VIKAS, VISHESH 258 HARVARD STREET 7 CAMBRIDGE, MA 02139-2525					FEES REGISTRATION 0.00 TITLE 0.00 SPECIAL PLATES 0.00 SALES TAX 0.00 TOTAL 0.00		

THE COMMONWEALTH OF MASSACHUSETTS REGISTRY OF MOTOR VEHICLES

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SPECIAL MESSAGE

RECEIPT IS ACKNOWLEDGED ON 11/20/15
OF THE NUMBER PLATE(S) ASSIGNED TO THE
VEHICLE DESCRIBED ABOVE.

CHANGE OF ADDRESS

STREET ADDRESS

CITY, STATE, ZIP CODE

MES

VJ

21

7

CI

MEG

RECAL

RJ

POI

VI

HOL

JL

MEG

VJ

21

7

CI

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Renew Your Registration

Pay Citations/Court Hearing Fee

Replace Your Driver's License

Request a Duplicate Title

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