

**JEFFERSON COUNTY COMMISSION**



DAVID ORANGE - PRESIDENT  
REUBEN DAVIS  
JIM GUNTER  
DR. JOHN KATOPODIS  
CHRIS McNAIR

C. H. RITCHIE  
Director  
Department of Revenue  
100-A Courthouse  
Birmingham, Alabama 35263-0064

STATE OF ALABAMA  
JEFFERSON COUNTY

I, C. H. RITCHIE, DIRECTOR OF REVENUE, in and for said County and State, hereby certify that the attached is a true and correct copy of registration of license tag 1DJ0121 for the year 1989.

I also certify there is no certificate of title law in Alabama for 1974 and older year model vehicles and only a vehicle registration and tax receipt is issued.

In witness whereof I hereunto set my hand and official seal this the 20th day of July, 1989.

*C H Ritchie*  
C. H. RITCHIE  
DIRECTOR OF REVENUE

**STATE OF ALABAMA**  
MOTOR VEHICLE REGISTRATION TAG AND TAX RECEIPT

CURRENT YEAR DECAL NO.

01 05 1989

111

PRINT YOUR CHARACTERS LIKE THIS

ABCDEFGHIJKLMN OPQRSTUVWXYZ 0123456789

XXX

ISSUING COUNTY CODE <b>01</b>	METAL TAG MARK BOX (X) IF ISSUED <b>X</b>	CURRENT TAG EXPIRES <b>0989</b>	TAG TYPE <b>PC</b>	ISSUE DATE <b>072089</b>	CURRENT YEAR TAG NO. <b>1D30121</b>
ISSUING COUNTY NAME		LAST YEAR TAG NO. <b>QQQ88045</b>			
TAX TAG	TAX TAG				
NO. OF MOS. <b>3</b>	<b>3</b>	FOR RENEWAL			

AFFIDAVIT ON FILE MARK BOX (X)	TITLE/APPLICATION NO.	VEHICLE TRANSFERRED MARK BOX (X)	DATE VEHICLE ENTERED STATE	RENEW THIS TAG IN <b>XX</b> <b>OCT/NOV 89</b>	OWNERS DECLARED GROSS WT. NOT OVER	FRUIT
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**OWNER**

NAME: **DIVERSIFIED LEASING ASSOCI**  
LAST FIRST MIDDLE SUFFIX

STREET: **1 INDEPENDENCE DR**

CITY: **BIRMINGHAM** STATE: **AL** ZIP: **35209**

MAKE: **FERR** YEAR: **52**

BODY: **CP** CLASS: **12C** COLOR: **RED**

MODEL: **225 S**

VEHICLE IDENTIFICATION NO.: **0478ED**

**DO NOT FOLD ORIGINAL**  
FOR OWNER CHANGES/CORRECTIONS FILL OUT BOX BELOW

NAME: **Domanski Ed Dr.**  
LAST FIRST MIDDLE SUFFIX

STREET:

CITY: STATE: ZIP:

**E0108253**

SUITE 504

10/28 1:22 P.M.

TELLER 123/117 TERM 111

MUN. CODE <b>03</b>	TAX AREA CODE	ASSESSED VALUE <b>40</b>	STATE	COUNTY/CITY <b>1-13</b>	SCHOOL <b>90</b>	HOSPITAL <b>60</b>	SPECIAL	OTHER	TOTAL TAX <b>\$ 2.63</b>
TRANS. FEE	LIC. & ISS. FEE <b>7.25</b>	PENALTY	CITATION	INTEREST	LOCAL REG. FEE	TOTAL TAG <b>7.25</b>		TOTAL TAG & TAX <b>9.88</b>	
NET PURCHASE PRICE	SALES TAX DUE <b>EXEMPT</b>	LESS SALES TAX PAID ANOTHER STATE	NET SALES TAX DUE	TYPE AD VALOREM EXEMPT		MAIL FEE	TOTAL TAG & TAX IF MAILED		
APP. FEE	AD VAL.	PENALTY * INTEREST	DATE ACQUIRED <b>7/10/89</b>	NEW USED <b>X</b>	ACQUIRED FROM <b>MAJOR</b>				

I, THE UNDERSIGNED, HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND ALL OF THE INFORMATION CONTAINED HEREON AND THAT IT IS TRUE AND CORRECT.

SIGNATURE: *[Signature]* **DLA** SIGN HERE

**C. H. RITCHIE, DIRECTOR**

REGISTRANT COPY