

Case No. 81220

In the Supreme Court of Nevada

EDWARD N. DETWILER,

Petitioner,

vs.

THE HONORABLE RICHARD SCOTTI, DISTRICT JUDGE; AND THE EIGHTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA, IN AND FOR THE COUNTY OF CLARK,

Respondents,

and

BAKER BOYER NATIONAL BANK,

Real Party in Interest.

Electronically Filed
Aug 26 2020 03:40 p.m.
Elizabeth A. Brown
Clerk of Supreme Court

District Court Case Nos.
A549111 & A772220

**BAKER BOYER NATIONAL BANK'S APPENDIX
VOLUME 4
PAGES 751-854**

DANIEL F. POLSENBERG (SBN 2376)
JOHN E. BRAGONJE (SBN 9519)
ABRAHAM G. SMITH (SBN 13,250)
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3993 Howard Hughes Parkway, Suite 600
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*Attorneys for Real Party in Interest
Baker Boyer National Bank*

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CERTIFICATE OF SERVICE

I certify that on August 26, 2020, I submitted the foregoing APPENDIX for filing *via* the Court's eFlex electronic filing system. Electronic notification will be sent to the following:

Mark A. Hutchison
Michael K. Wall
Brenoch Wirthlin
HUTCHISON & STEFFEN
10080 W. Alta Drive, Suite 200
Las Vegas, Nevada 89145

Attorneys for Petitioner

I further certify that I served a copy of this document by mailing a true and correct copy thereof, postage prepaid, at Las Vegas, Nevada, addressed as follows:

The Honorable Richard Scotti
DISTRICT COURT JUDGE – DEPT. 2
200 Lewis Avenue
Las Vegas, Nevada 89155

Respondent

/s/Jessie M. Helm
An Employee of Lewis Roca Rothgerber Christie LLP

Harry Hildibrand, LLC

1547

Harry Hildibrand, LLC
3011 American Way
Missoula, MT 59808-1921

Chase
90-7162/3222

1547

DATE

AMOUNT

\$

TO THE
ORDER
OF

AUTHORIZED SIGNATURE



⑈001547⑈ ⑆322271627⑆



Harry Hildibrand, LLC

1547

Heggen Law Office, PC

3011 American Way
PO Box 16270
Missoula, Montana 59808

Jared (Jed) Heggen
E-Mail:
www.heggenlawoffice.com

Toll Free: (888) 777-5032

Telephone: (406) 327-0401

Facsimile: (406) 543-8190

Thursday, March 22, 2018

First Legal Records
c/o Williams Investigations
1900 N. Last Chance Gulch, Ste. 12
Helena, MT 59601
(877) 591-9979

Montana 4th Judicial District Court
Missoula County

Case: BAKER BOYER NATIONAL BANK, A Washington Corporation, Plaintiff Vs. JAMES PATTERSON FOUST, JR., also known as James P. Foust, Jr., individually, and his marital community, if any, Case No. DV-18-180

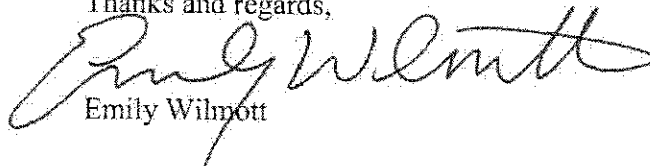
Dear Montana 4th Judicial District Court First Legal Records,

Our office was retained for the purpose of establishing and maintaining a Montana Limited Liability Company. Heggen Law Office and Jared S. Heggen act as the Registered Agent for Harry Hildibrand, LLC. Baker Boyer National Bank is seeking payment from James P. Foust following a Judgment in the courts of the State of Nevada (Case No. A-17-760669-F as noted in the subpoena) regarding a loan as well as legal fees from subsequent litigation. The Bank is seeking documents related to the sale, transfer, or lease of two vehicles previously registered by Harry Hildibrand, LLC and any communications related to the same. Given the scope of our legal services and thus relationship with James P. Foust the documents we have are limited to the titling and/or registration (and therefore registration renewal) of vehicles registered by Harry Hildibrand, LLC. The first vehicle referenced in the motorhome is specified as a model year 1998 in the subpoena although it is in fact a model year 1997. Any other documentation our office has, correspondence or otherwise, related to these vehicles pertains specifically to the provision of legal services to Harry Hildibrand, LLC and is therefore covered by attorney-client privilege.

- **Executed Certificate of Custodian of Records**
- **Document Production, Answer to Request No. 1-4:** Copy of the title and registration for the 1997 Prevost Motorhome (VIN 2PCM3349XV1026183) listing Harry Hildibrand, LLC as the owner
- **Document Production, Answer to Request No. 1-4:** Title transfer for the 1997 Prevost Motor home (VIN 2PCM3349XV1026183) Harry Hildibrand, LLC as the owner

- **Document Production, Answer to Request No. 5-8:** Registration documents, renewal tags, and FAA registration application for the 1978 Cessna P210N with the serial number P21000194, tail number N6634P.
- **Document Production, Answer to Request No. 9:**
 - Certificate of Title and Registration for 1966 Ford Thunderbird
 - Certificate of Title for 1963 Chevrolet Impala SS 409
 - Certificate of Title and Bill of Sale for 2000 GMC Yukon
 - Certificate of Title for 2007 Mercedes-Benz S550
 - Certificate of Title, Registration, Statement of Fact, DMV Vehicle Transfer and Reassignment Form, and Odometer Disclosure Statement for 2016 Kawasaki.
- **Document Production:** Privilege log listing documents that are legally privileged and immune from disclosure under attorney-client privilege.

Thanks and regards,



Emily Wilmott

CONFIDENTIALITY NOTICE

This transmission (and/or the documents accompanying it) may contain information belonging to the sender which is protected by the attorney-client privilege. The information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this information is strictly prohibited. If you have received this transmission in error, please immediately notify us by telephone to arrange for the return of the documents.

EXHIBIT BCERTIFICATE OF CUSTODIAN OF RECORDS

MONTANA

STATE OF NEVADA)

Case No.: DV-18-189

) ss.

COUNTY OF MISSOULA)

NOW COMES EMILY WILMOTT (name of custodian of records), who after first being duly sworn deposes and says:

1. That the deponent is the ATTORNEY/REGISTER (position or title) of HEGGEN LAW OFFICE (name of employer) and in his or her capacity as AGENT ATTORNEY (position or title) is a custodian of the records of HARRY HILDBRAND, LLC (name of employer).

2. That HEGGEN LAW OFFICE PC (name of employer) is licensed to do business as a ATTORNEY in the State of MONTANA.

3. That on the 22 day of the month of MARCH of the year 2018, the deponent was served with a subpoena in connection with the above-entitled cause, calling for the production of records pertaining to HARRY HILDBRAND, LLC TRANSFER OF PROPERTY.

4. That the deponent has examined the original of those records and has made or caused to be made a true and exact copy of them and that the reproduction of them attached hereto is true and complete.

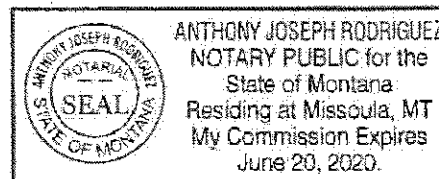
5. That the original of those records was made at or near the time of the act, event, condition, opinion or diagnosis recited therein by or from information transmitted by a person with knowledge, in the course of a regularly conducted activity of the deponent or HEGGEN LAW OFFICE (name of employer).

Executed on: 3-22-18
(Date)

Emily Wilmott
(Signature of Custodian of Records)

SUBSCRIBED AND SWORN to before me this
22 day of March, 20 18.

Anthony Joseph Rodriguez
NOTARY PUBLIC in and for the
County of Missoula, State of Montana.



STATE OF MONTANA

DEPARTMENT OF JUSTICE - MOTOR VEHICLE DIVISION
CERTIFICATE OF TITLE

pj571B

Title Nbr AA0987165	Year 1997	Make Prevost	Model Bus	Extended Model	Style BU	NCIC Vehicle Type CH	Unladen Weight/Material
VIN/HIN 2PCM3349XV1026183	MT Boat Nbr	Ton Code/Propulsion Type	Odometer as of //	Attribute	Owner Tracking Nbr	Vehicle Nbr 2950151	Fleet Nbr
Brand	Title Issue Date 09/21/2011	Vehicle Sale Date 09/09/2011	Transfer Reason OOS Title Transfer				

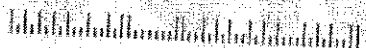
Owner Name and Address

Foust, James Patterson
720 1/2 Prince St
Missoula, MT 598012452
Customer Number: 2050514

This vehicle/vessel is subject to the following security interest:

Mail To:

Foust, James Patterson
720 1/2 Prince St
Missoula, MT 598012452



The vehicle/vessel may be subject to other security interests.

As the Registered Owner of the above vehicle, I transfer all right, title and interest in the vehicle to the following person, as of the date below:
Print name of buyer, whether individual or business: **HARRY HILDBRAUD, LLC**
Buyer's Street Address: **3011 AMERICAN WAY**
City: **MISSOULA** State: **MT** Zip: **59806**
Date of Transfer (delivery of vehicle):

Federal and state law require that the owner state the mileage of a vehicle upon transfer of ownership. If you fail to complete this disclosure or provide a false statement, you may be subject to fines and/or imprisonment.
I state that this (check one) ☐ one ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge it reflects the actual mileage unless one of the following statements is checked:

DO NOT CHECK UNLESS APPLICABLE:

- ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. Warning - odometer discrepancy.

Under penalty of law, I certify the above odometer disclosure and transfer of ownership information is correct to the best of my knowledge; that I am the same person named above; and if signing for a business, I have full authority to act upon behalf of the owner, whose name appears on the upper left side of this Title: **ALL OWNERS MUST SIGN.**

Signature of Owner or Agent of Owner (Transferor): **JAMES P. FOUST**
Signature of Owner or Agent of Owner (if more than one):
Printed name - must be the same as signature (do not type): **JAMES P. FOUST**

State of: **CA** County of: **Los Angeles**
Signed before me on (date): **January 12, 2017**

by (clearly print name of person signing Title): **James Patterson Foust**
Notary signature: **[Signature]** Printed name: **Luis Alberto Cervantes**
Title or rank: **Notary Public** Residing at: **San Pedro CA** My commission expires: **10/26/2017**

Notary Stamp/Seal: **LUIS ALBERTO CERVANTES**
Commission # 2047010
Notary Public - California
Los Angeles County
My Comm. Expires Oct 26, 2017

ACKNOWLEDGEMENT OF MILEAGE DISCLOSURE: I am aware of the above odometer certification made by the seller.
Signature of Buyer - only one signature is required: **[Signature]**
Printed name - must be the same as signature (do not type):

Rev. 08/10



TITLE AND REGISTRATION BUREAU
1003 BUCKSKIN DRIVE
DEER LODGE, MT 59722-2375

CONTROL NO. 12157948

Rev. 08/09

(This is not a title number)



220

KEEP IN SAFE PLACE-ANY ALTERATION-USE OF CORRECTION FLUID-ERASURE - VOIDS THIS TITLE.

HLO-SDT-000004

INSTRUCTIONS - READ CAREFULLY

Purchaser applying for title is required to complete and sign Section D. The purchaser must include their Driver License (DL), Federal Tax Identification number (FEIN), Tribal Identification number (Tribal ID) or Corporate Identification number (Corp ID). The title must be submitted to the County Treasurer within 40 days of purchase - failure to do so is a violation of 61-3-229, MCA, and will result in a \$10.00 penalty.

The secured party must include their Driver License, Federal Tax Identification number, Tribal Identification number or Corporate Identification number.

Licensed dealers may execute up to three transfers by completing Dealer Reassignment Sections A, B, and C. Insurance companies may execute one transfer by completing Section A. **WARNING:** Federal and State law requires that you transfer ownership to your purchaser and enter the mileage in connection with the transfer - failure to do so or providing a false statement is a violation of state law and may result in fines and/or imprisonment.

Any alteration - use of correction fluid/erasure - voids this certificate.

FIRST DEALER/INSURER REASSIGNMENT
For value received I, the undersigned dealer/insurer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____ Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage *unless one of the following statements is checked:*

DO NOT CHECK UNLESS APPLICABLE ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. *Warning - odometer discrepancy.*

I certify under penalty of law (Section 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership or insurer.

Signature of dealer/insurer (sign in ink) _____ Printed name _____

Name of dealership/insurer _____ Dealer license number _____ DL/FEIN/Tribal ID/Corp ID _____

I am aware of the above odometer certification made by the dealer or insurer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

SECOND DEALER REASSIGNMENT
For value received I, the undersigned dealer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____ Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage *unless one of the following statements is checked:*

DO NOT CHECK UNLESS APPLICABLE ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. *Warning - odometer discrepancy.*

I certify under penalty of law (Section 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership.

Signature of dealer (sign in ink) _____ Printed name _____

Name of dealership _____ Dealer license number _____ DL/FEIN/Tribal ID/Corp ID _____

I am aware of the above odometer certification made by the dealer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

THIRD DEALER REASSIGNMENT
For value received I, the undersigned dealer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____ Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage *unless one of the following statements is checked:*

DO NOT CHECK UNLESS APPLICABLE ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. *Warning - odometer discrepancy.*

I certify under penalty of law (Section 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership.

Signature of dealer (sign in ink) _____ Printed name _____

Name of dealership _____ Dealer license number _____ DL/FEIN/Tribal ID/Corp ID _____

I am aware of the above odometer certification made by the dealer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

TITLE APPLICATION - SECURITY INTEREST ACKNOWLEDGMENT
I/we state that I/we have compared the manufacturer's vehicle/vessel identification number shown on the face of this certificate with the manufacturer's vehicle/vessel identification plate affixed to the vehicle/vessel and they agree in every particular. This vehicle/vessel is subject to the security interest(s) shown below. Write "NONE" if no security interest exists: _____

First Secured Party _____ Security Interest Date _____

Address _____ DL/FEIN/Tribal ID/Corp ID _____

Second Secured Party _____ Security Interest Date _____

Address _____ DL/FEIN/Tribal ID/Corp ID _____

I/we certify under penalty of law (Section 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my/our knowledge, information and belief, that I/we are the same person(s) named below in this purchaser(s) application, and if signing for a commercial entity, I/we have full authority to do so.

HARRY HILDBRAND, LLC

Printed or typed name of purchaser/owner/business (1) _____ Printed or typed name of purchaser/owner (2) _____

Mailing address - purchaser 1 _____ Residence address - purchaser 1 (must be street or rural route) _____ City or town _____ State _____ Zip _____

Mailing address - purchaser 2 _____ Residence address - purchaser 2 (must be street or rural route) _____ City or town _____ State _____ Zip _____

John A. Huang, Jr. _____ **C162787** _____ **1/13/17** _____

Legal signature of purchaser/owner _____ DL/FEIN/Tribal ID/Corp ID purchaser (1) _____ DL/FEIN/Tribal ID/Corp ID purchaser (2) _____ Date _____

(sign in ink; only one signature required)

STATE OF MONTANA

DEPARTMENT OF JUSTICE - MOTOR VEHICLE DIVISION
CERTIFICATE OF TITLE

pj5753

Title Nbr AA3350572	Year 1997	Make Prevost	Model Bus	Extended Model	Style BU	NCIC Vehicle Type CH	Unladen Weight/Material
VIN/HIN 2PCM3349XV1026183	MT Boat Nbr	Ton Code/Propulsion Type		Odometer		Vehicle Nbr 2950151	
Brand	Title Issue Date 02/09/2017	Vehicle Sale Date 01/13/2017	Transfer Reason Cancel - Voluntary	Attribute	Owner Tracking Nbr	Fleet Nbr	

Owner Name and Address

Harry Hildibrand LLC
3011 American Way
Missoula MT 59806-1821
Customer Number: 1727321

This vehicle/vessel is subject to the following security interest(s):

Mail To:

Harry Hildibrand LLC
PO Box 16270
Missoula MT 59808

The vehicle/vessel may be subject to other security interests:

As the Registered Owner of the above vehicle, I transfer all right, title and interest in the vehicle to the following person, as of the date below:

Print name of buyer, whether individual or business _____ (Date of transfer (delivery of vehicle))

Buyer's Street Address _____ City _____ State _____ Zip _____

Federal and state law require that the owner state the mileage of a vehicle upon transfer of ownership. If you fail to complete this disclosure or provide a false statement, you may be subject to fines and/or imprisonment.

I state that this (check one) ☐ 5 or 6 digit odometer now reads (no tenths) _____ miles, same read _____ and to the best of my knowledge it reflects the actual mileage unless one of the following statements is checked:

DO NOT CHECK UNLESS APPLICABLE: ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. Warning - odometer discrepancy.

ALL OWNERS MUST SIGN - Additional owners are listed to the right of the first owner above.

Under penalty of law, I certify the above odometer disclosure and transfer of ownership information is correct to the best of my knowledge, that I am the same person named above, and if signing for a business entity or trust, I have full authority to act upon behalf of the owner, whose name appears on the upper left side of this title.

ALL OWNERS MUST SIGN	Signature of First Owner or Agent of Owner (Transferor)	Printed name - must be the same as signature (do not type)
X	Signature of Additional Owner or Agent of Owner (if more than one)	Printed name - must be the same as signature (do not type)

State of _____ County of _____ Signed before me on (date) _____ Notary Stamp/Seal _____

by (clearly print name of person signing title) _____

Notary signature _____

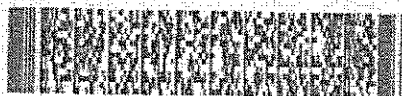
ACKNOWLEDGEMENT OF MILEAGE DISCLOSURE: I am aware of the above odometer certification made by the seller.

Signature of Buyer - only one signature is required _____ Printed name - must be the same as signature (do not type) _____

X



TITLE AND REGISTRATION BUREAU
1003 BUCKSKIN DRIVE
DEER LODGE MT 59722-2375



CONTROL NO. 14544545
(This is not a title number)

(REV. 04/2016)

KEEP IN SAFE PLACE-ANY ALTERATION-USE OF CORRECTION FLUID-ERASURE-VOIDS THIS CERTIFICATE

HLO-SDT 000006

222000757

VERIFY PRESENCE OF WATERMARK - HOLD TO LIGHT TO VIEW

000757

Motor Vehicle Division
200 W Broadway
Missoula, MT 59802

Financial Statement: 12947200

Original

Customer Information

Name: Harry Hildibrand LLC
 Address: Harry Hildibrand LLC
 PO Box 16270
 Missoula MT 59808

Statement Information

Date: 1/13/2017 2:12:57 PM
 Location: Missoula County
 Created By: pj0422
 Customer #: 1727321
 Comment:

Additional Customers:

Transaction Information

Description		Amount	
Motor Home 1997 Prevost Bus, 2PCM3349XV1026183 (Title And Registration)		\$262.50	
Product	Quantity	Amount	
Motor Home Registration Permanent	1	\$237.50	
MHP Salary and Retention Fee	1	\$5.00	
State Title Fee (excl Lt Veh)	1	\$10.00	
Std County Lg Initial Non Personalized Plate 2010	1	\$10.00	
Total Due:		\$262.50	

Payment Information

Montana Vehicle Registration

Valid Through Date 12/31/2019

Renewal Cust Nbr 1727321

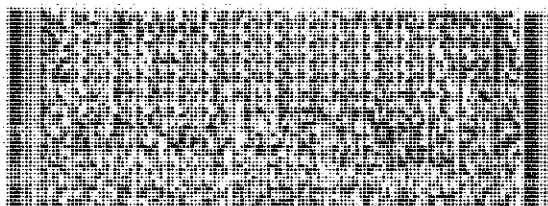
County	Missoula	Issue Date	01/13/2017	Tab Nbr	471237B129901
Usage	Regular	User	pj0422	Plate Nbr	471237B
Reg Usage	Regular	Fleet Nbr		Plate Type	Std County Lg (PC)
Reg Type	Permanent	OTN			

Owners / Lessors

Harry Hildibrand LLC
 3011 American Way
 Missoula, MT 598021921

VIN	2PCM3349XV1026183	Year	1997	Make	Prevost	Model	Bus
Veh Type	Motor Home (CH)	Style	BU	Color	White / Maroon	Ext Model	
Weight		Ton Code				Veh Nbr	2950151
Decl GVW		GVW Class		GVW Beg		GVW End	

Harry Hildibrand LLC
 PO Box 16270
 Missoula, MT 59808



By Registering this vehicle the applicant acknowledges having knowledge of the FMCSR and FHMR, if applicable.

223

FILED 2017 000007

INSTRUCTIONS:
 1) Remove decal by holding paper along dotted line and slowly peel
 2) Lift edge of decal and slowly peel

INSTRUCTIONS - READ CAREFULLY

Purchaser applying for title is required to complete and sign Section D. The purchaser must include their Driver License (DL), Federal Tax Identification number (FEIN), Tribal Identification number (Tribal ID) or Corporate Identification number (Corp ID). The title must be submitted to the County Treasurer within 40 days of purchase - failure to do so is a violation of 61-3-220, MCA, and will result in a \$10.00 penalty.

The secured party must include their Driver License, Federal Tax Identification number, Tribal Identification number or Corporate Identification number. Licensed dealers may execute up to three transfers by completing Dealer Reassignment Sections A, B, and C. Insurance companies may execute one transfer by completing Section A. **WARNING: Federal and State law requires that you transfer ownership to your purchaser and enter the mileage in connection with the transfer - failure to do so or providing a false statement is a violation of state law and may result in fines and/or imprisonment.**

Any alteration - use of correction fluid/erasure - voids this certificate.

FIRST DEALER/INSURER REASSIGNMENT

For value received I, the undersigned dealer/insurer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____ Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage *unless one of the following statements is checked:*

DO NOT CHECK ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
UNLESS APPLICABLE ☐ The odometer reading is not the actual mileage. *Warning - odometer discrepancy.*

I certify under penalty of law (Section 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership or insurer.

Signature of dealer/insurer (sign in ink) _____ Printed name _____

Name of dealership/insurer _____ Dealer license number _____ DL/FEIN/Tribal ID/Corp ID _____

I am aware of the above odometer certification made by the dealer or insurer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

SECOND DEALER REASSIGNMENT

For value received I, the undersigned dealer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____ Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage *unless one of the following statements is checked:*

DO NOT CHECK ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
UNLESS APPLICABLE ☐ The odometer reading is not the actual mileage. *Warning - odometer discrepancy.*

I certify under penalty of law (Section 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership.

Signature of dealer (sign in ink) _____ Printed name _____

Name of dealership _____ Dealer license number _____ DL/FEIN/Tribal ID/Corp ID _____

I am aware of the above odometer certification made by the dealer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

THIRD DEALER REASSIGNMENT

For value received I, the undersigned dealer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____ Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage *unless one of the following statements is checked:*

DO NOT CHECK ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
UNLESS APPLICABLE ☐ The odometer reading is not the actual mileage. *Warning - odometer discrepancy.*

I certify under penalty of law (Section 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership.

Signature of dealer (sign in ink) _____ Printed name _____

Name of dealership _____ Dealer license number _____ DL/FEIN/Tribal ID/Corp ID _____

I am aware of the above odometer certification made by the dealer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

TITLE APPLICATION - SECURITY INTEREST ACKNOWLEDGMENT

I/we state that I/we have compared the manufacturer's vehicle/vessel identification number shown on the face of this certificate with the manufacturer's vehicle/vessel identification plate affixed to the vehicle/vessel and they agree in every particular. This vehicle/vessel is subject to the security interest(s) shown below. Write "NONE" if no security interest exists: _____

First Secured Party _____ Security Interest Date _____

Address _____ DL/FEIN/Tribal ID/Corp ID _____

Second Secured Party _____ Security Interest Date _____

Address _____ DL/FEIN/Tribal ID/Corp ID _____

I/we certify under penalty of law (Section 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my/four knowledge, information and belief, that I/we are the same person(s) named below in this purchaser(s) application, and if signing for a commercial entity, I/we have full authority to do so.

HARRY HILDBRAND, LLC

Printed or typed name of purchaser/owner/business (1) _____ Printed or typed name of purchaser/owner (2) _____

P.O. Box 16270 _____ 3011 American Way Missoula MT 59806

Mailing address - purchaser 1 _____ Residence address - purchaser 1 (must be street or rural route) _____ City or town _____ State _____ Zip _____

Mailing address - purchaser 2 _____ Residence address - purchaser 2 (must be street or rural route) _____ City or town _____ State _____ Zip _____

Legal signature of purchaser/owner _____ DL/FEIN/Tribal ID/Corp ID purchaser (1) _____ DL/FEIN/Tribal ID/Corp ID purchaser (2) _____

(sign in ink, only one signature required) _____ Date _____

1/18/2017

FAA Registry - Aircraft - N-Number Inquiry

Aircraft
Inquiries

FAA Home » Licenses & Certificates » Aircraft Certification » Aircraft Registration » Aircraft Inquiry » N-Number Inquiry

FAA REGISTRY

N-Number Inquiry Results

N-number
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Name
Make / Model
Engine Reference
Dealer
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Canceled Registration
Reports
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N6634P is Assigned

Data Updated each Federal Working Day at Midnight

Request A Reserved
N-Number

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Number Renewal

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Aircraft Description		Status	
Serial Number	P21000194	Valid	07/17/2006
Manufacturer Name	CESSNA	Certificate Issue Date	07/17/2006
Model	P210N	Expiration Date	12/31/2017
Type Aircraft	Fixed Wing Single-Engine	Type Engine	Reciprocating
Pending Number Change	None	Dealer	No
Date Change Authorized	None	Mode S Code (base 8 / oct)	52141120
MFR Year	1976	Mode S Code (base 16 / hex)	A8C250
Type Registration	Corporation	Fractional Owner	NO

Registered Owner		State	
Name	HARRY HILDBRAND LLC	State	MONTANA
Street	3011 AMERICAN WAY	Zip Code	59908-11
City	MISSOULA		
County	MISSOULA		
Country	UNITED STATES		

Airworthiness		Standard	
Engine Manufacturer	CONT MOTOR	Classification	Normal
Engine Model	TSIO-520 SER	Category	Normal
A/W Date	05/15/1979		

The information contained in this record should be the most current Airworthiness information available in the historical aircraft record. However, it does not provide the basis for a determination regarding the airworthiness of an aircraft or the current aircraft configuration. For specific information request a copy of the aircraft record at <http://aircraft.faa.gov/e.gov/ND/>

Other Certifications
None

Temporary Certificates
None

Public Information
None

Data Updated each Federal Working Day at Midnight



Aircraft Inquiries

FAA Home » Licenses & Certificates » Aircraft Certification » Aircraft Registration » Aircraft Inquiry » N-Number Inquiry

N-Number

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N6634P has Assigned/Multiple Records

Data Updated each Federal Working Day at Midnight



N6634P has Assigned/Multiple Records

Serial Number	P21000194	Status	Valid
Manufacturer Name	CESSNA	Certificate Issue Date	07/17/2008
Model	P210N	Expiration Date	12/31/2020
Type Aircraft	Fixed Wing Single-Engine	Type Engine	Reciprocating
Pending Number Change	None	Dealer	No
Date Change Authorized	None	Mode S Code (base 8 / oct)	52141120
MFR Year	1978	Mode S Code (base 16 / hex)	ASC250
Type Registration	Corporation	Fractional Owner	NO

N6634P has Assigned/Multiple Records

HARRY HLOIBRAND LLC
3011 AMERICAN WAY

Name
Street

City
County
Country

MISSOULA
MISSOULA
UNITED STATES

State
Zip Code

MONTANA
59808-1921

000762

3/19/20

FAA Registry - Aircraft - N-Number Inquiry			
Engine Manufacturer	CONT MOTOR	Classification	Standard
Engine Model	TSIO-520 SER	Category	Normal
AW Date	05/15/1979		

The information contained in this record should be the most current Airworthiness information available in the historical aircraft record. However, this data alone does not provide the basis for a determination regarding the airworthiness of an aircraft or the current aircraft configuration. For specific information, you may request a copy of the aircraft record at <http://aircraft.faa.gov/easy/NEW>

Engine Manufacturer
None

Engine Model
None

Engine Category
None

Engine Status
None

000762

Deregistered Aircraft 1 of 1

Serial Number	24-1350	Aircraft Description	02/18/1960
Manufacturer Name	PIPER		52141120
Model	PA-24-250		A8C250
Year Manufacturer	None		09/27/1962
Reason for Cancellation	Exported		URUGUAY
Type Registration	Corporation		

Aircraft Registration prior to Deregistration

Name	JONAS AIRCRAFT & ARMS INC	Zip Code	10001
Street	120 WALL ST		
City	NEW YORK		
State	NEW YORK		
County	NEW YORK		
Country	UNITED STATES		

Engine Manufacturer	None
Engine Model	None
AWW Date	None

Deregistered Airworthiness

Classification	Unknown
Category	None

Deregistered Other Owner Names

None

Data Updated each Federal Working Day at Midnight

3/19/2

Aircraft Inquiries

Number

Serial Number

Name

Make / Model

Engine Reference

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FAA REGISTRY

Document Index Inquiry Results

Collateral Entered:

6634P

Type Collateral Collateral

Aircraft 6634P

Aircraft 6634P

Party

AUTO SERVICES INTERNATIONAL CORP

HARRY HILDBRAND LLC

Showing 1 - 2 of 2 (Page 1 of 1)




Document Receipt

Date

03/15/2018

03/15/2018

Data Updated each Federal Working Day at Midnight

 US Department of Transportation Federal Aviation Administration		Form Approved OMB No. 2120-0020 2/28/2011		Electronic Tracking Number	
		For FAA Use Only			
MAJOR REPAIR AND ALTERATION (Airframe, Powerplant, Propeller, or Appliance)					
INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))					
1. Aircraft	Nationality and Registration Mark N6634P		Serial No. P21000194		
	Make CESSNA		Model P210	Series N	
2. Owner	Name (As shown on registration certificate) HARRY HILDIBRAND LLC		Address (As shown on registration certificate) Address: 2875 PALMER ST. STE F City: MISSOULA State: MONTANA Zip: 59808-1741 Country: UNITED STATES		
	3. For FAA Use Only				
4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	AIRFRAME	_____	(As described in item 1 above)	_____
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type _____	_____	_____
			Manufacturer _____	_____	_____
6. Conformity Statement					
A. Agency's Name and Address			B. Kind of Agency		
Name: DAVID PEPPER Address: 1024 ROYAL OAKS DRIVE #419 City: MONROVIA State: CA Zip: _____ Country: _____			<input checked="" type="checkbox"/> U. S. Certificated Mechanic <input type="checkbox"/> Foreign Certificated Mechanic <input type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Certificated Maintenance Organization		
			Manufacturer C. Certificate No. 1508382		
D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.					
Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>		Signature/Date of Authorized Individual  DAVID PEPPER/06/20/2011			
7. Approval for Return to Service					
Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected					
BY:	FAA FTL Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport	
	FAA Designee	Repair Station	Inspection Authorization	Other (Specify):	
Certificate or Designation No. 1508382		Signature/Date of Authorized Individual  DAVID PEPPER/06-20/2011			

FAA Form 337 (10-05)

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

B. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N6534P

05/20/2011

Nationality and Registration Mark

Date

Total Time In Service 2,798.0 Hours

The following is a description of a Major Repair that was performed on the above identified aircraft after it experienced a landing gear collapse during a landing. All work was accomplished using the current Cessna Model P210 Series Service Manual Revision # 2 Chapter 18, and the recommended procedures and techniques of AC 43.13-1B Chapter 4 Paragraphs 4-53, 4-55, 4-56, 4-57, 4-58, Chapter 6 Paragraphs 6-36, 6-40, 6-58, 6-69, 6-70, 6-89, 6-90, and 6-91.

1. All damaged outer skin including the ADF sense antenna was removed from the aircraft. The skins attaching structure and supporting structure was inspected for damage, hidden damage or corrosion no defects noted.
2. The following skin part numbers were replaced. Skin Belly P/N 2111500-13, Gusset Main Landing Gear Bulkhead P/N 1211329-4, Skin Belly Section Aft P/N 2111500-2, Skin Belly Section forward P/N 2111600-4 and Skin Lower Forward Fuselage P/N 2113000-9. The above identified skins were fabricated from .032 and .053 2024T-3 aluminum sheet. The removed skins were used as templates and the fastener holes match drilled to the existing holes in the aircraft structure. All fabricated parts were treated with corrosion preventative before installation. The attaching fasteners are identical the ones used by the original manufacturer as specified in the Cessna P210 Illustrated Parts Catalog. The ADF Sense Antenna Doubler was duplicated and in-stalled in the identical position as specified by FAA Form 337 dated 07/01/2003.
3. All of the area's of the repaired pressure vessel including the ADF Sense Antenna were sealed using Flame Master Chemical Seal CS 3204 Class B2 Lot # 10070411A sealant with an expiration date of 08/11. The pressure vessel was test pressurized following the directions of the Cessna Model P210 Service Manual, no defects noted.
4. Instructions For Continued Airworthiness:
The aircraft was returned to it's original configuration before the Major Repair. The airworthiness of this repair will be inspected during the inspections mandated by Title 14 CFR Section 91.409, and all previous instructions for continued airworthiness.

END

☐ Additional Sheets Are Attached

OMB Control Number 2120-0729
Expires 2/29/2012

Paperwork Reduction Act Statement: The information collected on this form is necessary to obtain aircraft re-registration. We estimate that it will take approximately 30 minutes to complete the form. Please note that any agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. Form Approved, OMB No. 2120-0729
 Comments concerning the accuracy of this burden and suggestions for reducing the burden should be directed to the FAA at: 800 Independence Avenue SW, Washington, DC 20591. ATTN: Information Collection Clearance Officer, AES-200

**DEPARTMENT OF TRANSPORTATION-FEDERAL AVIATION ADMINISTRATION
 AIRCRAFT RE-REGISTRATION APPLICATION**

**FAILURE TO RE-REGISTER WILL RESULT
 IN CANCELLATION OF REGISTRATION
 AND REGISTRATION NUMBER ASSIGNMENT
 (See 14 C.F.R. §§ 47.15(f), 47.40 and 47.41)**

AIRCRAFT REGISTRATION NUMBER N 6634P		SERIAL NUMBER P21000194	
MANUFACTURER CESSNA		MODEL P210N	
DATE OF ISSUANCE 12/02/2011		DATE OF EXPIRATION 12/31/2014	
NAME AND MAILING ADDRESS OF REGISTERED OWNER (If individual, give last name, first name and middle initial) (Owner 1) HARRY HILDBRAND LLC (Owner 2) _____ Note: Enter any additional owner names on page two of this document. (Address) 2675 PALMER ST STE F (Address) _____ City MISSOULA State MT Zip 59808-1741 Country UNITED STATES		TYPE OF REGISTRATION CORPORATION	
PHYSICAL ADDRESS (REQUIRED WHEN MAILING ADDRESS IS A P.O. BOX OR MAIL DROP) (Address) _____ (Address) _____ City _____ State _____ Zip _____ Country _____		INFORMATION FOR COMPLETION Additional information may be obtained at our web page http://registry.faa.gov/renewregistration or by phone at 866-762-9434. Aircraft Registration Information may be reviewed at: http://registry.faa.gov/aircraftinquiry Please pay fees with a check or money order payable to the Federal Aviation Administration. Signature Requirements for Listed Registration Types: - Individual owner must sign. - Partnership a general partner must sign. - Corporation a corporate officer or managing official must sign. - Limited Liability Co. a member, manager, or officer who is authorized to manage the LLC must sign. - Co-owner each co-owner must sign, continuing as necessary, on page number two. - Government any authorized person may sign. Note: All signatures must be in ink.	
TO RE-REGISTER AIRCRAFT: REVIEW REGISTRATION INFORMATION, ENTER CORRECTIONS IN BLANKS PROVIDED. CHECK APPLICABLE BLOCK BELOW, SIGN, DATE, & MAIL WITH THE \$5 FEE, To: The FAA Aircraft Registration Branch, PO Box 25504, Oklahoma City, OK, 73125-0504. <input checked="" type="radio"/> I (WE) CERTIFY THE NAME(S) AND MAILING ADDRESS SHOWN ABOVE FOR THE OWNER(S) OF THIS AIRCRAFT ARE CORRECT. OWNERSHIP MEETS CITIZENSHIP REQUIREMENTS OF 14 CFR §47.3. AIRCRAFT IS NOT REGISTERED UNDER THE LAWS OF ANY FOREIGN COUNTRY. <input type="radio"/> UPDATE THE MAILING / PHYSICAL ADDRESS AS SHOWN BELOW. I (WE) CERTIFY THE NAME(S) SHOWN ABOVE FOR THE OWNER(S) OF THIS AIRCRAFT IS CORRECT. OWNERSHIP MEETS THE CITIZENSHIP REQUIREMENTS OF 14 CFR §47.3. AIRCRAFT IS NOT REGISTERED UNDER THE LAWS OF ANY FOREIGN COUNTRY. MAILING ADDRESS _____ _____ _____ PHYSICAL ADDRESS: COMPLETE IF PHYSICAL ADDRESS HAS CHANGED, OR NEW MAILING ADDRESS IS A PO BOX OR MAIL DROP. _____ _____ _____		TO CANCEL THE REGISTRATION FOR THIS AIRCRAFT: THE LAST REGISTERED OWNER MUST: MARK THE APPLICABLE BLOCK(S), COMPLETE, SIGN, DATE & Mail with any fees to: The FAA Aircraft Registration Branch, PO Box 25504, Oklahoma City, OK, 73125-0504. CANCELLATION OF REGISTRATION IS REQUESTED FOR THE REASON MARKED BELOW. <input type="checkbox"/> 1. THE AIRCRAFT WAS SOLD TO: (Show purchaser's name and address) _____ _____ _____ <input type="checkbox"/> 2. THE AIRCRAFT IS DESTROYED OR SCRAPPED. <input type="checkbox"/> 3. THE AIRCRAFT WAS EXPORTED TO: _____ _____ <input type="checkbox"/> 4. OTHER, Specify _____ <input type="checkbox"/> UPON CANCELLATION, PLEASE RESERVE THE N-NUMBER IN OWNERS' NAME. The \$10 check or money order for the N-number reservation fee is enclosed.	
SIGNATURE OF OWNER 1 Electronically Certified by Registered Owners		PRINTED NAME OF SIGNER	
SIGNATURE OF OWNER 2		PRINTED NAME OF SIGNER	
		TITLE	
		DATE 12/27/2011	
		DATE	

Fee paid: \$5 (201112021032596001NA)

FORM APPROVED
OAGS No. 2120-0042

Accepted DM Jul 17/2008

UNITED STATES OF AMERICA DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION-BIKE MONROVIE AERONAUTICAL CENTER AIRCRAFT REGISTRATION APPLICATION			
UNITED STATES REGISTRATION NUMBER		N6634P	
AIRCRAFT MANUFACTURER & MODEL		CESSNA P210	
AIRCRAFT SERIAL No.		P2100194	
		CERT. ISSUE DATE	
		FOR FAA USE ONLY	
TYPE OF REGISTRATION (Check one box)			
<input type="checkbox"/> 1. Individual <input type="checkbox"/> 2. Partnership <input checked="" type="checkbox"/> 3. Corporation <input type="checkbox"/> 4. Co-owner <input type="checkbox"/> 5. Govt. <input type="checkbox"/> 6. Non-Citizen Corporation			
NAME OF APPLICANT (Person(s) shown on evidence of ownership. If individual, give last name, first name, and middle initial.)			
HARRY HILDI BRAND, LLC			
TELEPHONE NUMBER: 310 490-4499			
ADDRESS (Permanent mailing address for first applicant listed.) (If P.O. BOX is used, physical address must also be shown.)			
Number and street: 2675 PALMER ST, SUITE F			
Rural Route:		P.O. Box:	
CITY	STATE	ZIP CODE	
MISSOULA	MT	59808	
<input type="checkbox"/> CHECK HERE IF YOU ARE ONLY REPORTING A CHANGE OF ADDRESS ATTENTION! Read the following statement before signing this application. This portion MUST be completed. A false or dishonest answer to any question in this application may be grounds for punishment by fine and / or imprisonment (U.S. Code, Title 18, Sec. 1001).			
CERTIFICATION			
I/WE CERTIFY:			
(1) That the above aircraft is owned by the undersigned applicant, who is a citizen (including corporations) of the United States.			
(For voting trust, give name of trustee: _____, or			
CHECK ONE AS APPROPRIATE:			
a. <input type="checkbox"/> A resident alien, with alien registration (Form 1-151 or Form 1-551) No. _____			
b. <input type="checkbox"/> A non-citizen corporation organized and doing business under the laws of (state) _____ and said aircraft is based and primarily used in the United States. Records or flight hours are available for inspection at _____			
(2) That the aircraft is not registered under the laws of any foreign country; and			
(3) That legal evidence of ownership is attached or has been filed with the Federal Aviation Administration.			
NOTE: If executed for co-ownership all applicants must sign. Use reverse side if necessary.			
TYPE OR PRINT NAME BELOW SIGNATURE			
EACH PART OF THIS APPLICATION MUST BE SIGNED IN INK.	SIGNATURE	TITLE	DATE
	JAMES P. FOUST	MEMBER	6/11/08
	SIGNATURE	TITLE	DATE
	JAMES P. FOUST	MEMBER	
	SIGNATURE	TITLE	DATE
NOTE: Pending receipt of the Certificate of Aircraft Registration, the aircraft may be operated for a period not in excess of 90 days, during which time the PINK copy of this application must be carried in the aircraft.			

AD Form 8050-1 (5/03) (0052-00-628-9007)

Pink Cy Retd

2008 JUN 13 PM 3 09

EXLHOP

000770

000770

Decals MUST BE AFFIXED
to the airplane on center line
of left side of aircraft just
forward of the stabilizer.

HEGGEN LAW OFFICE 3011 AMERICAN WAY PO BOX 16270 MISSOULA, MT 59808			
Tail Number N6694P	Manufacturer & Model CE P210N	Model Year 1978	
Nbr Engines 1	Type Piston	Reg Type 3	Horsepower 0
Use Type Business	Airport/Location missoula		
Color white/blue	County Where Based 04 - MISSOULA		
ELTs (121.5; 406; None) 121.5	Volunteer Aircraft for SAR? Yes / No		



Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

Date Paid 2/15/18	Check Nbr/Other Pay Type Credit Card	Decal Nbr 2822
----------------------	---	-------------------

Registration Fee Paid: 20.00

IMPORTANT!!!

Register online at
app.mt.gov/pilots/aircraftregistration using the
 Access Code below. *NOTE* - VENDOR FEES
APPLY FOR THE ONLINE SERVICE!
 If you do not wish to pay the vendor fees, you may
 sign below and return the entire form by mail.
 Make checks payable to:
 MDT Aeronautics Division
 Box 200507
 Helena, MT 59620-0507
 (406-444-2506)

Date	N Number	Access Code
12/22/2015	N6634P	A3HK7M

Registration Fee Due: \$100
 After 3/1/2016: Fee + Late Penalty: \$600

HARRY HILDBRAND LLC 2675 PALMER ST STE F MISSOULA, MT 59801			
N-Number N6634P	Manufacturer & Model CE P210N	Model Year 1978	
Nbr Engines 1	Type Engines Piston	Reg. Type 4	Horsepower 0
Use Type Business	Airport/Location MISSOULA		
Color WHITE/BLUE	County Where Based 04 - MISSOULA		
ELTs (121.5; 406; None) 121.5	Volunteer Aircraft for SAR? Yes / No		

AFFIDAVIT

YOU ARE EXEMPT FROM THE FEE AND PENALTY IF ANY OF THE CONDITIONS LISTED BELOW EXIST BY INITIALING AND SIGNING THE AFFIDAVIT.

Initial here if the aircraft has been disassembled or if a major repair is required to return to an airworthy condition.

Initial here if the aircraft is destroyed or used for salvage and will not return to an airworthy condition.

Initial here if you are an aircraft dealer and this aircraft is kept solely in inventory and not used for ANY flights other than sales demonstration.

Initial here if aircraft is based in another state or country and will not be registered in Montana and give location of aircraft:

Initial here if aircraft has been sold and give name and address of purchaser:

I certify that the described aircraft information, as corrected by me where necessary, is true and correct, and I understand that false swearing is punishable under Sec. 45-7-202, MCA.

Signed _____

Email _____

Date _____

Phone # _____

NOTE: AIRCRAFT REGISTRATION FEES MUST BE PAID NO LATER THAN MARCH 1st EACH YEAR. THE PENALTY FOR LATE REGISTRATION IS 5 TIMES THE FEE PLUS THE FEE. NEWLY PURCHASED AIRCRAFT MUST BE REGISTERED NO LATER THAN 30 DAYS FROM THE DATE OF INVOICE. AIRCRAFT OPERATED COMMERCIALY MUST BE REGISTERED PRIOR TO COMMENCING OPERATIONS.

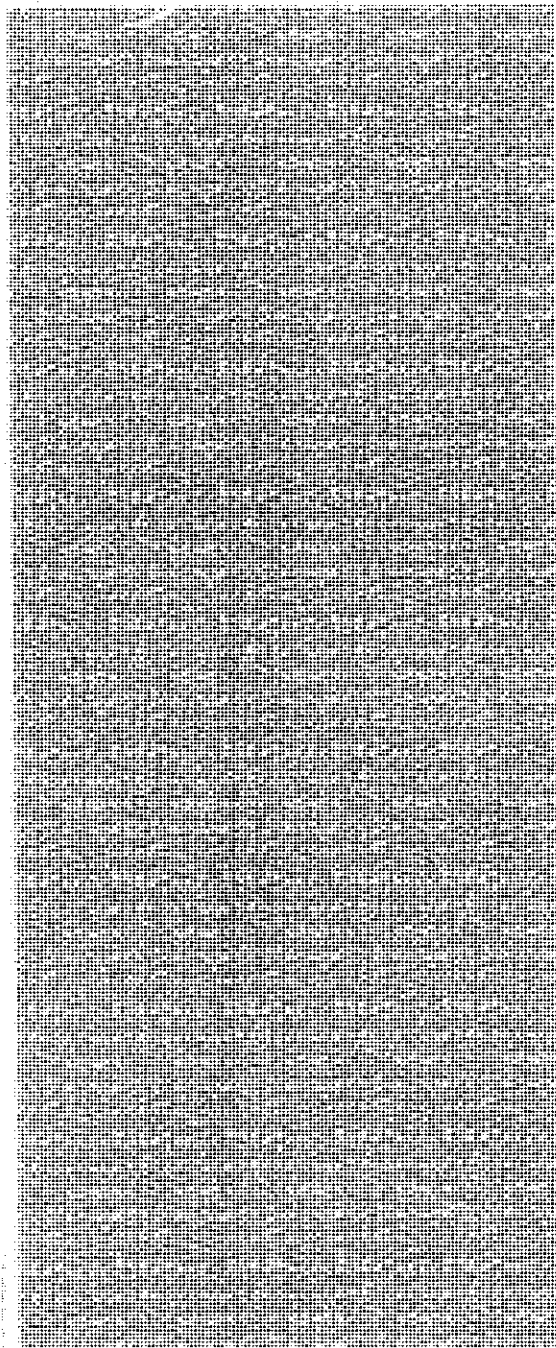
000773

Montana Department of Transportation

Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

***** 2015 AIRCRAFT REGISTRATION NOTICE *****

TO: HARRY HILDBRAND LLC
2675 PALMER ST STE F
MISSOULA MT 59801



000773

Jim Faust

HARRY HILDBRAND LLC 2675 PALMER ST STE F MISSOULA, MT 59801		 Montana Department of Transportation Aeronautics Division Helena, MT 59620-0507 (404-2506)		Check Nbr/Other Pay Type 7373	Decal Nbr 3116
N-Number N6634P	Manufacturer & Model CE p210N	Model 1978			
Nbr Engines 1	Type Engine Piston	Horsepower 0			
Use Type Business	Airport/Location MISSOULA				
County Where Based 04 - MISSOULA	Color WHITE/BLUE				
Aircraft ELTs 121.5	SAR Volunteer No				

2014 3116

AIRCRAFT REGISTRATION
CERTIFICATE
MONTANA
DEPT. OF TRANSPORTATION
AERONAUTICS DIVISION

Registration Fee Paid: 100.00

HARRY HILDBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

NNumber	Manufacturer & Model		Model Year
N6634P	CE P210N		1978
Nbr Engines	Type Engines	Horsepower	Aircraft Color
1	P		
Date of Purchase	Use	Airport Where Based	
	B	MISSOULA	
Reg. Type	County Where Based		
4	04 - MISSOULA		

ENTIRE FORM MUST BE RETURNED.
Sign below and return on or before due date.
Make checks payable to:

Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

Date	NNumber
06-DEC-2012	N6634P-13

Registration Fee Due: \$100.00
After 03/01/13 - Fee + Late Penalty: \$600.00
(see *NOTE below)

AFFIDAVIT

YOU ARE EXEMPT FROM THE FEE AND PENALTY IF ANY OF THE CONDITIONS LISTED BELOW EXIST BY INITIALING AND SIGNING THE AFFIDAVIT.

- Initial here if the aircraft has been disassembled or if a major repair is required to return to an airworthy condition.
- Initial here if the aircraft is destroyed or used for salvage and will not return to an airworthy condition.
- Initial here if you are an aircraft dealer and this aircraft is kept solely in inventory and not used for ANY flights other than sales demonstration.
- Initial here if aircraft has been sold and give name and address of purchaser:

I certify that the described aircraft information, as corrected by me where necessary, is true and correct, and I understand that false swearing is punishable under Sec. 15-7-202, MCA.
Phoned: 310 490 4499 signed *[Signature]* Date: 2/20/2013

*NOTE: AIRCRAFT REGISTRATION FEES MUST BE PAID NO LATER THAN MARCH 1st EACH YEAR. THE PENALTY FOR LATE REGISTRATION IS 5 TIMES THE FEE PLUS THE FEE. NEWLY PURCHASED AIRCRAFT MUST BE REGISTERED NO LATER THAN 30 DAYS FROM DATE OF INVOICE. AIRCRAFT OPERATED COMMERCIALY MUST BE REGISTERED PRIOR TO COMMENCING OPERATIONS.

JARED S. HEGGEN, PLLC
IOLA TRUST ACCOUNT MONTANA LAW FOUNDATION

Montana Department of Transportation

Plane N6634P-13 reg ren

2/26/2013

7065

100.00

First National IOLA Tr N6634P-13

100.00

SF2001-1

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HLO-SDT 000024

HARRY HILDBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

N Number	Manufacturer & Model		Model Year
N6634P	CE P210N		1978
Nbr Engines	Type Engines	Horsepower	Aircraft Color
1	P		
Date of Purchase	Use	Airport Where Based	
	B	MISSOULA	
Reg. Type	County Where Based		
4	04 - MISSOULA		

ENTIRE FORM MUST BE RETURNED.
Sign below and return on or before due date.
Make checks payable to:

Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

Date	N Number
06-DEC-2012	N6634P-13

Registration Fee Due: \$100.00
After 03/01/13 - Fee + Late Penalty: \$600.00
(see *NOTE below)

AFFIDAVIT

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I certify that the described aircraft information, as corrected by me where necessary, is true and correct, and I understand that false swearing is punishable under Sec. 45-7-262, MCA.
Phone# _____ Signed _____ Date _____

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2011 2470 0000 0465 5251 2222 E222

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12/27/12	
Sent To	
Jim Foust	
Street, Apt. No., or PO Box No.	
10821 Woodstream Ct	
City, State, ZIP+4	
Las Vegas NV 89135	
PS Form 3800, August 2008	
See Reverse for Instructions	

241

HLO-SDT 000025

777000

HARRY HILDBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

N Nbr
N6634P

Manufacturer & Model
CE P210N

Nbr Engines
1

Type Engine
P

Horse

Date Purch

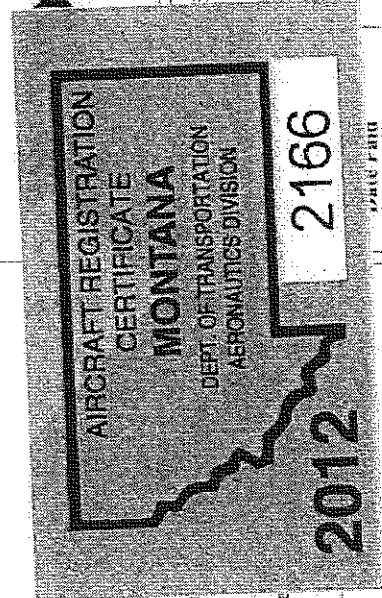
Use

MISSOULA

Reg Type
4

County Where Based

04 - MISSOULA



Department of Transportation
Aeronautics Division

507
MT 59620-0507

Date Paid	Check Nbr	Decal Nbr
18-JAN-2012	6700	2166

Registration Fee Paid \$100.00

Tim Faust

000777

877000

JARED S. HEGGEN, PLLC
IOLA TRUST ACCOUNT MONTANA LAW FOUNDATION

Montana Department of Transportation

plane N6634P-12 reg ren

1/16/2012

67.00

100.00

First National IOLA Tr N6634P-12

SAFE GUARD
SF6001-1
JAN 16 2012 04:00:11

TO REORDER, CALL YOUR LOCAL SAFE GUARD DISTRIBUTOR AT 800-475-0654

100.00

GSI-ZT-0018003 V073F00448

000778

Jim Foust

HARRY HILDBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

N Number	Manufacturer & Model		Model Year
N6634P	CE P210N		1978
Nbr Engines	Type Engines	Horsepower	Aircraft Color
1	P		
Date of Purchase	Use	Airport Where Based	
	B	MISSOULA	
Reg. Type	County Where Based		
4	04 - MISSOULA		

IMPORTANT!!!

ENTIRE FORM MUST BE RETURNED.

Sign below and return on or before due date.

Make checks payable to:

Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

Date	N Number
07-DEC-2011	N6634P-12

Registration Fee Due: \$100.00

After 03/01/12 - Fee + Late Penalty: \$600.00

(see *NOTE below)

AFFIDAVIT

ARE EXEMPT FROM THE FEE AND PENALTY IF ANY OF THE CONDITIONS LISTED BELOW EXIST BY INITIALING AND SIGNED THE AFFIDAVIT.

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I certify that the described aircraft information, as corrected by me where necessary, is true and correct, and I understand that false swearing is punishable under Sec. 45-7-202, MCA.
Phone# 306 490 4499 signed Jim Foust Date 1/5/12

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HARRY HILDBRAND LLC 2675 PALMER ST STE F MISSOULA MT 59801			
N Number	Manufacturer & Model		Model Year
N6634P	CE P210N		1978
Nbr Engines	Type Engines	Horsepower	Aircraft Color
1	P		
Date of Purchase	Use	Airport Where Based	
	B	MISSOULA	
Reg. Type	County Where Based		
4	04 - MISSOULA		

IMPORTANT!!!

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Sign below and return on or before due date.
Make checks payable to:

Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

Date	N Number
07-DEC-2011	N6634P-12

Registration Fee Due: \$100.00

After 03/01/12 - Fee + Late Penalty: \$600.00

(see NOTE below)

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Phone#

Signed

Date

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HARRY HILDBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

N Nbr
N6634P

Manufacturer & Model
CE P210N

Model Year
1978

Nbr Engines
1

Type Engine
P

Horsepower

Color

Date Purch

Use

Airport

B

MISSOULA

Reg Type
4

County Where Based

04 - MISSOULA

Date Paid

28-FEB-2011

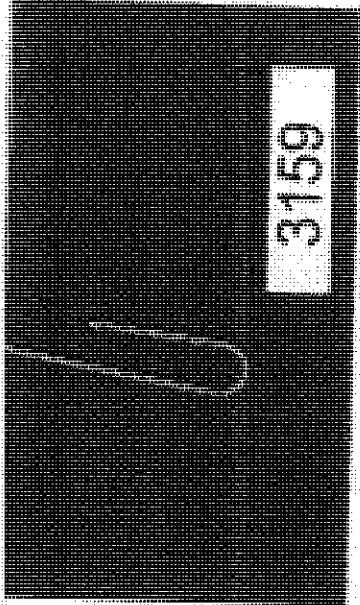
Check Nbr

6471

Decal Nbr

3159

Registration Fee Paid \$100.00



MISSOULA MT 59801-0507

Jim Foust

HARRY HILDBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

IMPORTANT!!!

ALL FORMS MUST BE RETURNED.
Sign below and return with registration

Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

N Number	Manufacturer & Model		Model Year
N6634P	CE P210N		1978
Nbr Engines	Type Engines	Horsepower	Aircraft Color
1	P		
Date of Purchase	Use	Airport Where Based	
	B	MISSOULA	
Reg. Type	County Where Based		
4	04 - MISSOULA		

Date	N Number
02-FEB-2011	N6634P-11

Registration Fee Due: \$100.00
After 03/01/11 - Fee + Late Penalty: \$600.00
(see *NOTE below)

AFFIDAVIT

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Montana Department of Transportation
Aeronautics Division
Box 200507
Helena MT 59620-0507

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***** 2011 AIRCRAFT REGISTRATION NOTICE *****

TO: HARRY HILDIBRAND LLC
2675 PALMER ST STE F
MISSOULA MT 59801

LAHIST: 58008

|||||

000783

HARRY HILDBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

N Number	Manufacturer & Model		Model Year
N6634P	CE P210N		1978
Nbr Engines	Type Engines	Horsepower	Aircraft Color
1	P		
Date of Purchase	Use	Airport Where Based	
	B	MISSOULA	
Reg. Type	County Where Based		
4	04 - MISSOULA		

IMPORTANT!!!

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Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

Date	N Number
02-DEC-2010	N6634P-11

Registration Fee Due: \$100.00
After 03/01/11 - Fee + Late Penalty: \$600.00
(see *NOTE below)

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Return Receipt Fee (Endorsement Required)	2.30
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Total Postage & Fees	\$ 5.54

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Here

Talked to Jim + he put
form, ACK + \$ in mail
from NV on Saturday the 19th
JH

Jim Foust
HARRY HILDBRAND, LLC
10821 Woodstream Ct
Las Vegas NV 89135

HARRY HILDBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

N Number	Manufacturer & Model		Model Year
N6634P	CE P210N		1978
Nbr Engines	Type Engines	Horsepower	Aircraft Color
1	P		
Date of Purchase	Use	Airport Where Based	
	B	MISSOULA	
Reg. Type	County Where Based		
4	04 - MISSOULA		

IMPORTANT!!!

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Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

Date	N Number
02-DEC-2010	N6634P-11

Registration Fee Due: \$100.00

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(see *NOTE below)

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Phone# 310-490-4499 Signed *Jim Foust* Date 2/18/11

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JARED S. HEGGEN, PLLC
IOLTA TRUST ACCOUNT MONTANA LAW FOUNDATION

Montana Department of Transportation

2011 Airplane reg renewal N6634P-11

2/25/2011

6471

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First National IOLA Tr N6634P-11

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HARRY HILDBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

N Number	Manufacturer & Model		Model Year
N6634P	CE P210N		1978
Nbr Engines	Type Engines	Horsepower	Aircraft Color
1	P		
Date of Purchase	Use	Airport Where Based	
	B	MISSOULA	
Reg. Type	County Where Based		
4	04 - MISSOULA		

IMPORTANT!!!

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Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

Date	N Number
01-DEC-2009	N6634P-10

Registration Fee Due: \$100.00
After 03-01-10 - Fee + Late Penalty: \$600.00
(see *NOTE below)

AFFIDAVIT

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I certify that the described aircraft information, as corrected by me where necessary, is true and correct, and I understand that false swearing is punishable under Sec. 45-7-202, MCA.
Phone# 310-490-4499 signed Jared S. Heggen Date 12/17/2009

JARED S. HEGGEN, PLLC
IOLA TRUST ACCOUNT MONTANA LAW FOUNDATION

Montana Department of Transportation

Airplane reg renewal N6634P-10

12/28/2009

6178

100.00

First National IOLA Tr N6634P-10 renewal

100.00

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Jim Forest



Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507

Date Paid	Check Nbr	Decal Nbr
29-DEC-2009	6178	1689

Registration Fee Paid \$100.00

HARRY HILDBRAND LLC 2675 PALMER ST STE F MISSOULA MT 59801			
N Nbr N6634P	Manufacturer & Model CE P210N	Model Year 1978	
Nbr Engines 1	Type Engine P	Horsepower	Color
Date Purch	Use B	Airport MISSOULA	
Reg Type 4	County Where Based 04 - MISSOULA		



HARRY HILDBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

ALL MS MUST BE RETURNED.
Sign below and return with registration

Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

N Number	Manufacturer & Model		Model Year
N6634P	CE P210N		1978
Nbr Engines	Type Engines	Horsepower	Aircraft Color
1	P		
Date of Purchase	Use	Airport Where Based	
	E	MISSOULA	
Reg. Type	County Where Based		
4	04 - MISSOULA		

Date	N Number
01-DEC-2009	N6634P-10

Registration Fee Due:

\$100.00
After 03-01-10 - Fee + Late Penalty: \$600.00
(see *NOTE below)

AFFIDAVIT
YOU ARE EXEMPT FROM THE FEE AND PENALTY IF ANY OF THE CONDITIONS LISTED BELOW EXIST BY INITIALIZING A SIGNING THE AFFIDAVIT.

Initial here if the aircraft has been disassembled or if a major repair is required to return airworthy condition.

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Phone# _____ Signed _____ Date _____

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(Domestic Mail Only. No Insurance Coverage Provided)
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Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	Jim Housli

10821 Woodstream Ct
Las Vegas NV 89135

Street, City, St

7004 4000 0520 4004

HARRY HILDIBRAND LLC
2675 PALMER ST STE F

MISSOULA MT 59801

N Number	Manufacturer & Model		Model Year
N6634P	CE P210N		1978
Nbr Engines	Type Engines	Horsepower	Aircraft Color
1	P		
Date of Purchase	Use	Airport Where Based	
	E	MISSOULA	
Reg. Type	County Where Based		
4	04 - MISSOULA		

IMPORTANT!!!

ALL FORMS MUST BE RETURNED.
Sign below and return with registration

Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

Date	N Number
01-DEC-2008	N6634P-09

Registration Fee Due: \$100.00

After 03/01/09 - Fee + Late Penalty: \$600.00
(see *NOTE below)

AFFIDAVIT

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I certify that the described aircraft information, as corrected by me where necessary, is true and correct, and I understand that false swearing is punishable under Sec. 45-7-202, MCA.
Phone# 310-470-4499 signed Jared S. Hegggen Date 12/19/08

JARED S. HEGGEN, PLLC
IOLTA TRUST ACCOUNT MONTANA LAW FOUNDATION

Montana Department of Transportation

Foust, J. m
Airplane renewal N6634P-09

12/31/2008

5929

100.00

First National IOLA Tr N6634P

100.00

TO REORDER, CALL YOUR LOCAL SAFEGUARD DISTRIBUTOR AT 800-478-0568

QSLPDR0010000 Y07SF004448

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HLO-SDT 000038

067000

HARRY HILDBRAND LLC
810 W CENTRAL AVE STE 3

MISSOULA MT 59801

ALL FORMS MUST BE RETURNED.
Sign below and return with registration
fee if applicable made payable to:

Montana Department of Transportation
Aeronautics Division
Box 200507
Helena, MT 59620-0507
(406-444-2506)

N Number		Manufacturer & Model		Model Year	
N6634P		Cessna P210N		1978	
Nbr Engines	Type	Engines	Horsepower	Aircraft Color	
1	P				
Date of Purchase		Use	Airport Where Based		
		B	MISSOULA		
Reg. Type	County Where Based				
4	04 - MISSOULA				

Date	N Number
07-DEC-2007	N6634P-08

Registration Fee Due: \$100.00

After March 1 - Fee + Late Penalty: \$600.00
(see NOTE below)

AFFIDAVIT

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I certify that the described aircraft information, as corrected by me where necessary, is true and correct, and I understand that false swearing is punishable under Sec. 45-7-302, MCA.

Phone: 310-490-4999 signed

James P. Frost

Date

1/25/08

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000790

000791

JARED S. HEGGEN, PLLC
COLTA TRUST ACCOUNT MONTANA LAW FOUNDATION
Montana Department of Transportation

5555

1/30/2008

100.00

Airplane renewal N6634P-08

First National IOLA Tr N6634P-08

1001

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INSURANCE CO. OF AMERICA
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STATE OF MONTANA

DEPARTMENT OF JUSTICE - MOTOR VEHICLE DIVISION
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pj5753

Title Nbr	Year	Make	Model	Extended Model	Style	NCIC Vehicle Type	Unladen Weight/Material
AA3350550	1966	Ford	Thunderbird		CP	PC	2800
VIN/VIN	MT Boat Nbr	Ton Code	Propulsion Type	Odometer			Vehicle Nbr
6Y85Z104010							4005486
Brand	Title Issue Date	Vehicle Sale Date	Transfer Reason	Attribute	Owner Tracking Nbr	Fleet Nbr	
	02/09/2017	01/13/2017	OOS Title Transfer				

Owner Name and Address
 Harry Hildibrand LLC
 3011 American Way
 Missoula MT 59808-1921
 Customer Number: 1727321

This vehicle/vessel is subject to the following security interest(s):

Mail To:
 Harry Hildibrand LLC
 PO Box 16270
 Missoula MT 59808

The vehicle/vessel may be subject to other security interests:

SELLER COMPLETES IN INK	As the Registered Owner of the above vehicle, I transfer all right, title and interest to the following person, as of the date below:	
	Print name of buyer, whether individual or business	Date of Transfer (delivery of vehicle)
	Buyer's Street Address	City State Zip
	Federal and state law require that the owner state the mileage of a vehicle upon transfer of ownership. If you fail to complete this disclosure or provide a false statement, you may be subject to fines and/or imprisonment. I state that this (check one): <input type="checkbox"/> or <input type="checkbox"/> digital odometer now reads (no sense) miles, date read _____ and to the best of my knowledge it reflects the actual mileage unless one of the following statements is checked: DO NOT CHECK (UNLESS APPLICABLE): <input type="checkbox"/> The odometer reading reflects the amount of mileage in excess of its mechanical limits. <input type="checkbox"/> The odometer reading is not the actual mileage. Warning - odometer discrepancy. ALL OWNERS MUST SIGN - Additional owners are listed to the right of the first owner above. Under penalty of law, I certify the above odometer disclosure and transfer of ownership information is correct to the best of my knowledge; I am not the same person named above, and if signing for a business entity or trust, I have full authority to act upon behalf of the owner, whose name appears on the upper left side of this Title. ALL OWNERS MUST SIGN: <input checked="" type="checkbox"/> Signature of First Owner or Agent of Owner (Transferor) Printed Name - must be the same as signature (do not type) MUST SIGN: <input checked="" type="checkbox"/> Signature of Additional Owner or Agent of Owner (if more than one) Printed Name - must be the same as signature (do not type) State of _____ County of _____ Signed before me on (date) _____ Notary Stamp/Seal: _____ by (clearly print name of person signing title) _____ Notary signature: _____	
BUYER	ACKNOWLEDGEMENT OF MILEAGE DISCLOSURE: I am aware of the above odometer certification made by the seller. Signature of Buyer - only one signature is required. _____ Printed Name - must be the same as signature (do not type) _____	



TITLE AND REGISTRATION BUREAU
 1003 BUCKSKIN DRIVE
 DEER LODGE MT 59722-2375



CONTROL NO. 14544544
 (This is not a title number)

(REV. 04/2016)

KEEP IN SAFE PLACE-ANY ALTERATION-USE OF CORRECTION FLUID-ERASURE-VOIDS THIS CERTIFICATE



Application for Certificate of Title for a Motor Vehicle

MVD Use Only

Title and Registration Bureau

P.O. Box 201431, 302 N Roberts, Helena, MT 59620-1431

Phone (406) 444-3661 Fax (406) 444-0116 • mvdtitleinfo@mt.gov

Fees: \$12 for light vehicles, trucks and buses weighing less than one ton;
\$10 for all other vehicles. Additional fees and taxes will be due upon registration.

Title Number:

A	Applicant Section	Applicant's Legal Name (first, middle, last) or Firm Name: HARRY HILDIBRAND, LLC		DL/FEIN/Tribal ID/Corp ID* C162787 <small>State where DL issued:</small>	
		Co-Applicant's Legal Name (first, middle, last):		Please indicate if owner or lessee: Owner <input type="checkbox"/> Lessee <input type="checkbox"/>	
		Mailing Address: PO BOX 16270		City: MISSOULA	State: MT
		Residential Address: 3011 AMERICAN WAY		City: MISSOULA	State: MT
				Zip Code: 59808	County: MISSOULA
B	Vehicle Section	Manufacturer's Suggested Retail Price: \$	Year: 1966	Make: FORD	Model: THUNDERBIRD
		Vehicle Identification Number: 6Y85Z104010	Color: RED	Fuel Type: 1	Unladen Weight: <input checked="" type="checkbox"/> 2850 lbs or less <input type="checkbox"/> Over 2850 lbs
		Trucks One Ton and Under: <input type="checkbox"/> 1/4 ton <input type="checkbox"/> 1/2 ton <input type="checkbox"/> 3/4 ton <input type="checkbox"/> 1 ton	Trucks Over One Ton: Manufacturer's Rated Capacity:	Trailer/Travel Trailer/Camper/Motor Home: Declared Weight: Length:	Motorcycle and Quadricycle: CC: Wheel Base: Wheel Diameter:
		Motor Home Class: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C			
		<input type="checkbox"/> Street rod <input type="checkbox"/> Kit vehicle <input type="checkbox"/> Custom vehicle <input type="checkbox"/> Specially constructed vehicle			
C	Is there a security interest or lien against this vehicle?	<input checked="" type="checkbox"/> No - go to Section D <input type="checkbox"/> Yes - complete this section and submit a filing fee of \$8 for each security interest or lien.			
		Date of First Security Interest:	Amount: \$	Name of First Secured Party or Lienholder:	
		Mailing Address of First Secured Party or Lienholder:		City:	State: Zip Code:
		Date of 2nd Security Interest:	Amount: \$	Name of Second Secured Party or Lienholder:	
		Mailing Address of Second Secured Party or Lienholder:		City:	State: Zip Code:
D	Odometer/Statement of Sale Section	Under penalty of law (MCA 45-7-203), I certify that:			
		The vehicle described above was sold <input type="checkbox"/> new <input type="checkbox"/> used to the applicant named in Section A on (date) _____ by (printed name of seller) _____ Seller's Address: _____			
		The (check one) <input type="checkbox"/> five or <input type="checkbox"/> six digit odometer now reads (no tenths) _____ miles, date read _____ and, to the best of my knowledge, it reflects the actual mileage unless one of the following statements is checked:			
		<div style="border: 1px solid black; padding: 5px;"> DO NOT CHECK UNLESS APPLICABLE <input type="checkbox"/> The odometer reading reflects the amount of mileage in excess of its mechanical limits. <input type="checkbox"/> The odometer reading is not the actual mileage. Warning - odometer discrepancy. </div>			
		If signing for a business entity or trust, I have full authority to do so.			
		Dated this _____ day of _____, 20____			
		Dealer's License Number		Signature of Dealer's Agent - this is my legal signature	
		Dealer's Firm Name		Printed Name of Dealer's Agent	
E	Applicant's Acknowledgement	Under penalty of law (MCA 45-7-203), I certify that:			
		I am one of the applicants named in Section A; I am aware of the odometer certification made in Section D; I have provided the appropriate identification number to the Department; The statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief; I am the person named on this form; and, if signing for a business entity or trust, I have full authority to do so.			
		Dated this <u>13</u> day of <u>JANUARY</u> , 20 <u>17</u>			
		HARRY HILDIBRAND, LLC		Signature - this is my legal signature (only one signature is required) LISA A HAUGEN, AGENT	
		If Applicant is a Business Entity, Give Full Name		Printed Name of Applicant	

*DL- Driver License Number; FEIN- Federal Employer Identification Number; Tribal ID- Tribal Identification card; Corp. ID- Corporate Identification; CTD- Customer Identification number

Motor Vehicle Division
200 W Broadway
Missoula, MT 59802

Original

Financial Statement: 12947117

Customer Information

Name: Harry Hildibrand LLC
 Address: Harry Hildibrand LLC
 PO Box 16270
 Missoula MT 59808

Statement Information

Date: 1/13/2017 2:08:35 PM
 Location: Missoula County
 Created By: pj0422
 Customer #: 1727321

Comment:

Additional Customers

Transaction Information

Description	Amount	
Passenger 1966 Ford Thunderbird, 6Y85Z104010 (Title And Registration)	\$133.00	
Product	Quantity	Amount
Light Vehicle Registration Permanent	1	\$87.50
MHP Salary and Retention Fee	1	\$5.00
State Parks	1	\$6.00
Light Vehicle Title Fee	1	\$12.00
Std County Lg Initial Non Personalized Plate 2010	1	\$10.00
County Tax	1	\$12.50
Total Due:		\$133.00

Montana Vehicle Registration

Valid Through Date 12/31/9999

Renewal Cust Nbr 1727321

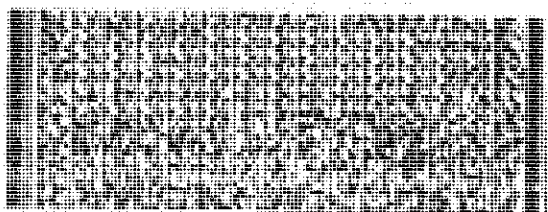
County	Missoula	Issue Date	01/13/2017	Tab Nbr	471236B129901	Park Fee Paid
Usage	Regular	User	pj0422	Plate Nbr	471236B	
Reg Usage	Regular	Fleet Nbr		Plate Type	Std County Lg (PC)	
Reg Type	Permanent	OTN				

Owners / Lessors

Harry Hildibrand LLC
 3011 American Way
 Missoula, MT 598081921

VIN	6Y85Z104010	Year	1966	Make	Ford	Model	Thunderbird
Veh Type	Passenger (PC)	Style	CP	Color	Red	Ext Model	
Weight	2800	Ton Code				Veh Nbr	4005486
Decl GVW		GVW Class		GVW Beg		GVW End	

Harry Hildibrand LLC
 PO Box 16270
 Missoula, MT 59808



HLO-SDT 000043

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INSTRUCTIONS
 1) Remove decal
 by peeling paper
 along dotted line
 2) Lift edge of decal
 and slowly peel

STATE OF MONTANA

DEPARTMENT OF JUSTICE - MOTOR VEHICLE DIVISION
CERTIFICATE OF TITLE

PJ5723

Title Nbr	Year	Make	Model	Extended Model	Style	NCIC Vehicle Type	Unladen Weight/Material
AA2573232	1983	Chevrolet	Impala SS 493		CP	PC	3500
VIN/HIN	MT Boat Nbr	Ton Code/Propulsion Type		Odometer		Vehicle Nbr	
31847L144085						3636566	
Brand	Title Issue Date	Vehicle Sale Date	Transfer Reason	Attribute	Owner Tracking Nbr	Fleet Nbr	
	06/04/2015	05/13/2015	OOS Title Transfer				

Owner Name and Address

Harry Hildibrand LLC
2675 Palmer St Ste 1
Missoula MT 59808
Customer Number: 1727321

This vehicle/vessel is subject to the following security interest(s):

Mail To

Harry Hildibrand LLC
PO Box 16270
Missoula MT 59808

The vehicle/vessel may be subject to other security interests.

As the Registered Owner of the above vehicle, I transfer all right, title and interest to the vehicle to the following person, as of the date below:

Print name of buyer, whether individual or business

Date of Transfer (delivery of vehicle)

Buyer's Street Address

City

State

Zip

Federal and state law require that the owner state the mileage of a vehicle upon transfer of ownership. If you fail to complete this disclosure or provide a false statement, you may be subject to fines and/or imprisonment.

I state that this (check one) ☐ or ☐ digit odometer now reads (no tenths) miles, date read and to the best of my knowledge it reflects the actual mileage unless one of the following statements is checked.

DO NOT CHECK UNLESS APPLICABLE:

- ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. Warning - odometer discrepancy.

ALL OWNERS MUST SIGN - Additional owners are listed to the right of the first owner above.

Under penalty of law, I certify the above odometer disclosure and transfer of ownership information is correct to the best of my knowledge, that I am the same person named above, and I signing for a business entity or trust, I have full authority to act upon behalf of the owner, whose name appears on the upper left side of this Title.

ALL OWNERS	Signature of First Owner or Agent of Owner (Transferor)	Printed name - must be the same as signature (do not type)
MUST SIGN	Signature of Additional Owner or Agent of Owner (if more than one)	Printed name - must be the same as signature (do not type)
X		

State of	County of	Signed before me on (date)	Notary Stamp/Seal

by (clearly print name of person signing Title)

Notary signature

ACKNOWLEDGEMENT OF MILEAGE DISCLOSURE: I am aware of the above odometer certification made by the buyer.

Signature of Buyer - only one signature is required

Printed name - must be the same as signature (do not type)

Rev. 11/2014



TITLE AND REGISTRATION BUREAU
1003 BUCKSKIN DRIVE
DEER LODGE MT 59722-2375



CONTROL NO. 13778375
(This is not a title number)

KEEP IN SAFE PLACE-ANY ALTERATION-USE OF CORRECTION FLUID-ERASURE - VOIDS THIS TITLE

INSTRUCTIONS – READ CAREFULLY

(Page 2 Revised May 2012)

- Purchaser applying for title is required to complete and sign Section D. The purchaser must include their dealer license number, driver license (DL), federal tax identification number (FEIN), tribal identification number (Tribal ID) or corporate identification number (Corp ID). The title must be submitted to the County Treasurer within 40 days of purchase – failure to do so is a violation of MCA 61-3-220 and will result in a \$10.00 penalty.
- The secured party must include their driver license, federal tax identification number, tribal identification number or corporate identification number.
- Licensed dealers may execute up to three transfers by completing Dealer Reassignment Sections A, B, and C. Insurance companies may execute one transfer by completing Section A. **WARNING:** Federal and state law requires that you transfer ownership to your purchaser and enter the mileage in connection with the transfer – failure to do so or providing a false statement is a violation of state law and may result in fines and/or imprisonment.
- Any alteration – use of correction fluid/erasure – voids this certificate.

For value received I, the undersigned dealer/insurer, transfer ownership of the vehicle/vessel described on this certificate of title to:

FIRST DEALER/INSURER REASSIGNMENT

Print name of purchaser(s) _____ Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage **unless one of the following statements is checked:**

☐ DO NOT CHECK UNLESS APPLICABLE ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. **Warning – odometer discrepancy.**

I certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership or insurer.

Signature of dealer/insurer (sign in ink) _____ Printed name _____
 Name of dealership/insurer _____ Dealer license number or DL/FEIN/Tribal ID/Corp ID _____

A I am aware of the above odometer certification made by the dealer or insurer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

For value received I, the undersigned dealer, transfer ownership of the vehicle/vessel described on this certificate of title to:

SECOND DEALER REASSIGNMENT

Print name of purchaser(s) _____ Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage **unless one of the following statements is checked:**

☐ DO NOT CHECK UNLESS APPLICABLE ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. **Warning – odometer discrepancy.**

I certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership.

Signature of dealer (sign in ink) _____ Printed name _____
 Name of dealership _____ Dealer license number _____

B I am aware of the above odometer certification made by the dealer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

For value received I, the undersigned dealer, transfer ownership of the vehicle/vessel described on this certificate of title to:

THIRD DEALER REASSIGNMENT

Print name of purchaser(s) _____ Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage **unless one of the following statements is checked:**

☐ DO NOT CHECK UNLESS APPLICABLE ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. **Warning – odometer discrepancy.**

I certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership.

Signature of dealer (sign in ink) _____ Printed name _____
 Name of dealership _____ Dealer license number _____

C I am aware of the above odometer certification made by the dealer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

I/we state that I/we have compared the manufacturer's vehicle/vessel identification number shown on the face of this certificate with the manufacturer's vehicle/vessel identification plate affixed to the vehicle/vessel and they agree in every particular. This vehicle/vessel is subject to the security interest(s) shown below. Write "NONE" if no security interest exists:

DEALER APPLICATION – SECURITY INTEREST ACKNOWLEDGMENT

First Secured Party _____ Security Interest Date _____
 Address _____ DL/FEIN/Tribal ID/Corp ID _____
 Second Secured Party _____ Security Interest Date _____
 Address _____ DL/FEIN/Tribal ID/Corp ID _____

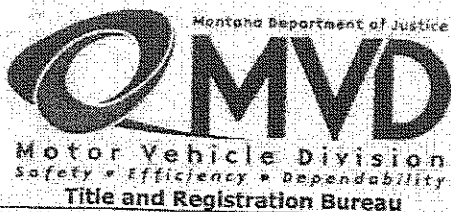
I/we certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my/our knowledge, information and belief, that I/we are the same person(s) named below in this purchaser's application, and if signing for a commercial entity, I/we have full authority to do so.

Printed or typed name of purchaser/owner/business (1) _____ Printed or typed name of purchaser/owner (2) _____

Mailing address – purchaser 1 _____ Residence address – purchaser 1 (must be street or rural route) _____ City or town _____ State _____ Zip _____

Mailing address – purchaser 2 _____ Residence address – purchaser 2 (must be street or rural route) _____ City or town _____ State _____ Zip _____

D Legal signature of purchaser/owner _____ Dealer License Number _____ DL/FEIN/Tribal ID/Corp ID purchaser (1) _____ DL/FEIN/Tribal ID/Corp ID purchaser (2) _____ Date _____
 (sign in ink, only one signature required)



Application for Certificate of Title for a Motor Vehicle

MVD Use Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 444-3661 Fax (406) 846-6039 • mvdtitleinfo@mt.gov

Fees: \$12 for light vehicles, trucks and buses weighing less than one ton;
\$10 for all other vehicles. Additional fees and taxes will be due upon registration.

Title Number:

A Applicant Section Applicant's Legal Name (first, middle, last) or Firm Name: **HARRY HILDBRAND, LLC** DL/FEIN/Tribal ID/Corp ID* **C162787**

Co-Applicant's Legal Name (first, middle, last):

Please indicate if owner
or lessee: Owner ☒ Lessee ☐

DL/FEIN/Tribal ID/Corp ID*

State where DL issued:

Mailing Address:

PO BOX 16270

City:

MISSOULA

State:

MT

Zip Code:

59808

County:

MISSOULA

Residential Address:

2675 PALMER STREET SUITE F

City:

MISSOULA

State:

MT

Zip Code:

59808

County:

MISSOULA

B Vehicle Section

Manufacturer's Suggested
Retail Price: \$ **2924**

Year: **1963**

Make: **CHEVROLET**

Model: **IMPALA SS 409**

Style: **CP**

Vehicle Identification Number:

31847L144085

Color:

RED

Fuel Type:

1

Unladen Weight:

☐ 2850 lbs or less ☒ Over 2850 lbs

Motor Home Class:

☐ A ☐ B ☐ C

Trucks One Ton and Under:

☒ 1/4 ton ☒ 1/2 ton
☒ 3/4 ton ☒ 1 ton

Trucks Over One Ton:

Manufacturer's Rated
Capacity: _____

Trailer/Travel Trailer/Camper/
Motor Home:

Declared Weight: _____
Length: _____

Motorcycle and Quadricycle:

CC: _____
Wheel Base: _____
Wheel Diameter: _____

☐ Street rod ☐ Kit vehicle

☐ Custom vehicle
☐ Specially constructed vehicle

**C Is there a security interest or
lien against this vehicle?**

☒ No - go to Section D
☐ Yes - complete this section and submit a filing fee of \$8 for each security interest or lien.

Date of First Security

Amount

Name of First Secured Party or Lienholder:

DL/FEIN/Tribal ID/Corp ID*

Interest:

Mailing Address of First Secured Party or Lienholder:

City:

State:

Zip Code:

Date of 2nd Security

Amount

Name of Second Secured Party or Lienholder:

DL/FEIN/Tribal ID/Corp ID*

Interest:

Mailing Address of Second Secured Party or Lienholder:

City:

State:

Zip Code:

**D Odometer/Statement
of Sale Section**

Under penalty of law (MCA 45-7-203), I certify that:

The vehicle described above was sold ☒ new ☐ used to the applicant named in Section A on (date) _____ by (printed name of seller) _____ Seller's Address: _____

The (check one) ☒ five or ☐ six digit odometer now reads (no tenths) _____ miles, date read _____ and, to the best of my knowledge, it reflects the actual mileage **unless one of the following statements is checked:**

**DO NOT CHECK
UNLESS APPLICABLE**

☐ The odometer reading reflects the amount of mileage **in excess of its mechanical limits.**
☐ The odometer reading is not the actual mileage. **Warning - odometer discrepancy.**

If signing for a business entity or trust, I have full authority to do so.

Dated this _____ day of _____ 20 _____

Dealer's License Number

Signature of Dealer's Agent - this is my legal signature

Dealer's Firm Name

Printed Name of Dealer's Agent

**E Applicant's
Acknowledgement**

Under penalty of law (MCA 45-7-203), I certify that:

- I am one of the applicants named in Section A;
- I am aware of the odometer certification made in Section D;
- I have provided the appropriate identification number to the Department;
- The statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief; I am the person named on this form; and, if signing for a business entity or trust, I have full authority to do so.

and this **13** day of **MAY** 20 **15**

Lisa A. Haugen
Signature - this is my legal signature (only one signature is required)

HARRY HILDBRAND, LLC

If Applicant is a Business Entity, Give Full Name

LISA A HAUGEN, AGENT

Printed Name of Applicant

*DL-Driver License Number; FEIN-Federal Employer Identification Number; Tribal ID-Tribal Identification card; Corp. ID-Corporate Identification; CID-Customer Identification number

STATE OF MONTANA

DEPARTMENT OF JUSTICE - MOTOR VEHICLE DIVISION
CERTIFICATE OF TITLE

p5744

Title Nbr	Year	Make	Model	Extended Model	Style	NCIC Vehicle Type	Unladen Weight/Material
AA2386414	2000	Gmc	Yukon		LL	LL	5100
VIN/HIN		MT Boat Nbr	Ton Code/Propulsion Type	Odometer			Vehicle Nbr
1GKEK13T9YJ174042							3543928
Brand	Title Issue Date	Vehicle Sale Date	Transfer Reason	Attribute	Owner Tracking Nbr	Fleet Nbr	
	12/15/2014	12/05/2014	OOS Title Transfer				

Owner Name and Address
 Harry Hildibrand Lic
 2075 Palmer St
 Ste F
 Missoula, MT 598081741
 Customer Number: 1590166

This vehicle/vessel is subject to the following security interest:

Mail To:

Harry Hildibrand Lic
 PO Box 16270
 Missoula, MT 598086270



The vehicle/vessel may be subject to other security interests.

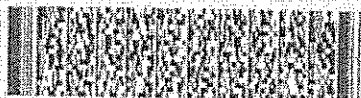
SELLER COMPLETES IN INK	As the Registered Owner of the above vehicle, I transfer all right, title and interest in the vehicle to the following person, as of the date below:			
	Print name of buyer, whether individual or business		Date of Transfer (delivery of vehicle)	
	Buyer's Street Address		City	State Zip
	Federal and state law require that the owner state the mileage of a vehicle upon transfer of ownership. If you fail to complete this disclosure or provide a false statement, you may be subject to fines and/or imprisonment. I state that the (check one) <input type="checkbox"/> or <input type="checkbox"/> digital odometer now reads (see bottom) _____ miles, state read _____ and to the best of my knowledge it reflects the actual mileage unless one of the following statements is checked: <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> DO NOT CHECK UNLESS APPLICABLE: <input type="checkbox"/> The odometer reading reflects the amount of mileage in excess of its mechanical limits. <input type="checkbox"/> The odometer reading is not the actual mileage. Warning - odometer discrepancy. </div>			
NOTARY	Under penalty of law, I certify the above odometer disclosure and transfer of ownership information is correct to the best of my knowledge; that I am the same person named above; and if signing for a business, I have full authority to act upon behalf of the owner, whose name appears on the paper left side of this Title. ALL OWNERS MUST SIGN.			
	Signature of Owner or Agent of Owner (Transferor)		Printed name - must be the same as signature (do not type)	
	Signature of Owner or Agent of Dealer (if more than one)		Printed name - must be the same as signature (do not type)	
	State of _____ County of _____		Signed before me on (date) _____	
BUYER	by (clearly print name of person signing, Title)		Notary Stamp/Seal	
	Notary signature _____		Printed name _____	
	Title of clerk _____		My commission expires _____	
	ACKNOWLEDGEMENT OF MILEAGE DISCLOSURE: I am aware of the above odometer certification made by the seller. Signature of Buyer - only one signature is required _____ Printed name - must be the same as signature (do not type) _____			

Rev. 09/10



TITLE AND REGISTRATION BUREAU
 1003 BUCKSKIN DRIVE
 DEER LODGE MT 59722-2376

CONTROL NO. 13591720
 (This is not a title number)



KEEP IN SAFE PLACE-ANY ALTERATION-USE OF CORRECTION FLUID-ERASURE - VOIDS THIS TITLE

INSTRUCTIONS - READ CAREFULLY

(Page 2 Revised May 2012)

- Purchaser applying for title is required to complete and sign Section D. The purchaser must include their dealer license number, driver license (DL), federal tax identification number (FEIN), tribal identification number (Tribal ID) or corporate identification number (Corp ID). The title must be submitted to the County Treasurer within 40 days of purchase - failure to do so is a violation of MCA 61-3-220 and will result in a \$10.00 penalty.
- The secured party must include their driver license, federal tax identification number, tribal identification number or corporate identification number.
- Licensed dealers may execute up to three transfers by completing Dealer Reassignment Sections A, B, and C. Insurance companies may execute one transfer by completing Section A. **WARNING:** Federal and state law requires that you transfer ownership to your purchaser and enter the mileage in connection with the transfer - failure to do so or providing a false statement is a violation of state law and may result in fines and/or imprisonment.
- Any alteration - use of correction fluid/erasure - voids this certificate.

For value received I, the undersigned dealer/insurer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____

Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage *unless one of the following statements is checked:*DO NOT CHECK
UNLESS APPLICABLE☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. *Warning - odometer discrepancy.*

I certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership or insurer.

Signature of dealer/insurer (sign in ink) _____

Printed name _____

Name of
dealership/insurer _____Dealer license number or
DL/FEIN/Tribal ID/Corp ID _____

I am aware of the above odometer certification made by the dealer or insurer. Print business name _____

Date of sale _____

Signature of purchaser _____

Printed name (do not type) _____

For value received I, the undersigned dealer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____

Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage *unless one of the following statements is checked:*DO NOT CHECK
UNLESS APPLICABLE☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. *Warning - odometer discrepancy.*

I certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership.

Signature of dealer (sign in ink) _____

Printed name _____

Name of dealership _____

Dealer license number _____

I am aware of the above odometer certification made by the dealer. Print business name _____

Date of sale _____

Signature of purchaser _____

Printed name (do not type) _____

For value received I, the undersigned dealer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____

Address _____

I state that this (check one) 5 ☐ or 6 ☐ digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage *unless one of the following statements is checked:*DO NOT CHECK
UNLESS APPLICABLE☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. *Warning - odometer discrepancy.*

I certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership.

Signature of dealer (sign in ink) _____

Printed name _____

Name of dealership _____

Dealer license number _____

I am aware of the above odometer certification made by the dealer. Print business name _____

Date of sale _____

Signature of purchaser _____

Printed name (do not type) _____

I/we state that I/we have compared the manufacturer's vehicle/vessel identification number shown on the face of this certificate with the manufacturer's vehicle/vessel identification plate affixed to the vehicle/vessel and they agree in every particular. This vehicle/vessel is subject to the security interest(s) shown below. Write "NONE" if no security interest exists: _____

First Secured Party _____

Security Interest Date _____

Address _____

DL/FEIN/Tribal ID/Corp ID _____

Second Secured Party _____

Security Interest Date _____

Address _____

DL/FEIN/Tribal ID/Corp ID _____

I/we certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my/our knowledge, information and belief, that I/we are the same person(s) named below in this purchaser(s) application, and if signing for a commercial entity, I/we have full authority to do so.

Printed or typed name of purchaser/owner/business (1) _____

Printed or typed name of purchaser/owner (2) _____

Mailing address - purchaser 1 _____

Residence address - purchaser 1 (must be street or rural route) _____

City or town _____

State _____

Zip _____

Mailing address - purchaser 2 _____

Residence address - purchaser 2 (must be street or rural route) _____

City or town _____

State _____

Zip _____

Legal signature of purchaser/owner _____

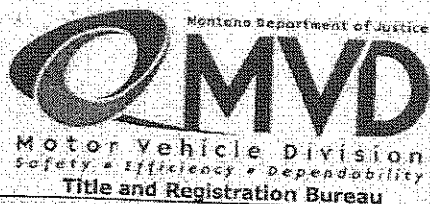
Dealer License Number _____

DL/FEIN/Tribal ID/Corp ID purchaser (1) _____

DL/FEIN/Tribal ID/Corp ID purchaser (2) _____

Date _____

(Sign in ink, only one signature required)



Application for Certificate of Title for a Motor Vehicle

MVD Use Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 444-3661 Fax (406) 846-6039 • mvdtitleinfo@mt.gov

Fees: \$12 for light vehicles, trucks and buses weighing less than one ton;
\$10 for all other vehicles. Additional fees and taxes will be due upon registration.

Title Number:

A Applicant Section

Applicant's Legal Name (first, middle, last) or Firm Name:

HARRY HILDBRAND, LLC

DL/FEIN/Tribal ID/Corp ID*

C162787

Co-Applicant's Legal Name (first, middle, last):

Please indicate if owner or lessee: Owner ☒ Lessee ☐

State where DL issued:
DL/FEIN/Tribal ID/Corp ID*

Mailing Address:

PO BOX 16270

City:

MISSOULA

State:

MT

Zip Code:

59808

County:

MISSOULA

Residential Address:

2675 PALMER STREET SUITE F

City:

MISSOULA

State:

MT

Zip Code:

59808

County:

MISSOULA

B Vehicle Section

Manufacturer's Suggested

Year:

2000

Make:

GMC

Model:

YUKON

Style:

LL

Retail Price: \$

Vehicle Identification Number:

1GKEK13T9YJ174042

Color:

WHITE

Fuel Type:

1

Unladen Weight:

☒ 2850 lbs or less ☐ Over 2850 lbs

Motor Home Class:

☐ A ☐ B ☐ C

Trucks One Ton and Under:

☐ 1/4 ton ☐ 1/2 ton

☐ 3/4 ton ☐ 1 ton

Trucks Over One Ton:

Manufacturer's Rated

Capacity:

Trailer/Travel Trailer/Camper/

Motor Home:

Declared Weight:

Length:

Motorcycle and Quadricycle:

CC:

Wheel Base:

Wheel Diameter:

☐ Street rod ☐ Kit vehicle

☐ Custom vehicle

☐ Specially constructed vehicle

C Is there a security interest or lien against this vehicle?

☐ No - go to Section D

☐ Yes - complete this section and submit a filing fee of \$8 for each security interest or lien.

Date of First Security

Amount

Name of First Secured Party or Lienholder:

DL/FEIN/Tribal ID/Corp ID*

Interest:

Mailing Address of First Secured Party or Lienholder:

City:

State:

Zip Code:

Date of 2nd Security

Amount:

Name of Second Secured Party or Lienholder:

DL/FEIN/Tribal ID/Corp ID*

Interest:

Mailing Address of Second Secured Party or Lienholder:

City:

State:

Zip Code:

D Odometer/Statement of Sale Section

Under penalty of law (MCA 45-7-203), I certify that:

- The vehicle described above was sold ☐ new ☐ used to the applicant named in Section A on (date) _____ by (printed name of seller) _____ Seller's Address: _____
- The (check one) ☐ five or ☐ six digit odometer now reads (no tenths) _____ miles, date read _____ and, to the best of my knowledge, it reflects the actual mileage *unless one of the following statements is checked:*

DO NOT CHECK UNLESS APPLICABLE

- ☐ The odometer reading reflects the amount of mileage *in excess of its mechanical limits.*
- ☐ The odometer reading is not the actual mileage. **Warning - odometer discrepancy.**

- If signing for a business entity or trust, I have full authority to do so.

Dated this _____ day of _____ 20 _____

Dealer's License Number

Signature of Dealer's Agent - this is my legal signature

Dealer's Firm Name

Printed Name of Dealer's Agent

E Applicant's Acknowledgement

Under penalty of law (MCA 45-7-203), I certify that:

- I am one of the applicants named in Section A;
- I am aware of the odometer certification made in Section D;
- I have provided the appropriate identification number to the Department;
- The statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief; I am the person named on this form; and, if signing for a business entity or trust, I have full authority to do so.

Dated this 5 day of DECEMBER 20 14

HARRY HILDBRAND, LLC

Applicant is a Business Entity, Give Full Name

Lisa A. Haugen
Signature - this is my legal signature (only one signature is required)

LISA A HAUGEN, AGENT

Printed Name of Applicant

*DL-Driver License Number; FEIN-Federal Employer Identification Number; Tribal ID-Tribal Identification card; Corp. ID-Corporate Identification; CID-Customer Identification number



Bill of Sale

Office Use
Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 444-2661 Fax (406) 846-6039 • mvdtitleinfo.mt.gov

*** This form must be completed in its entirety. ***

As recorded on this form, I received the sum of VALUE RECEIVED dollars

(\$N/A) and other valuable consideration to sell, transfer and deliver to

Purchaser HARRY HILDBRAND, LLC DL/FEIN/Tribal ID/Corp ID* C162787

Address 2675 PALMER STREET SUITE F

my right, title and interest to the following described vehicle/vessel:

Year 2000 Make GMC Model YUKON Style L1

Vehicle/Hull Identification No. 1GKEK13T9YJ174042 License Plate No. _____

Salvage vehicle (must be 15 years old or older): ☐ Yes ☒ No

Sold for parts only: Yes ☐ No ☒

Odometer Statement

The (check one) ☐ five or ☐ six digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge it reflects the actual mileage unless one of the following statements is checked:

DO NOT CHECK UNLESS APPLICABLE	<input type="checkbox"/> The odometer reading reflects the amount of mileage in excess of its mechanical limits.
	<input type="checkbox"/> The odometer reading is not the actual mileage. Warning - odometer discrepancy.

I (purchaser) am aware of the odometer certification made by the seller above.

Purchaser's signature [Signature] Date _____
This is my legal signature

Purchaser's printed name HARRY HILDBRAND, LLC

Electronic title acknowledgement if electronic record transfer is required in accordance with MCA 61-3-220(1)(a) & (2), I certify that:

- I am not in possession of the title.
- I am the owner of this vehicle and I authorize the transfer to the above named purchaser.
- I have not previously transferred to another person for sale.

I further certify that:

- I have the right to sell the vehicle/vessel described above and will warrant and defend the title against the claims and demands of all persons except the secured party noted on the Montana title application.
- Under penalty of law (MCA 45-7-203), I certify that the statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief; I am the person named on this form; and, if signing for a business entity or trust, I have full authority to do so.

→ Seller's signature _____ Date _____
This is my legal signature (All owners must sign)

Seller's printed name JPF ENTERPRISES DL/FEIN/Tribal ID/Corp ID* _____
If signing for a business entity, give full entity name

Address 10821 Woodstream Ct. Las Vegas, NV 89135

*DL=Driver License No.; FEIN=Federal Employee Identification No.; Tribal ID=Tribal Identification Card No.; Corp ID=Corporate Identification No.

Notary Use Only:

State of _____	County of _____	Signed before me on (date) _____	Notary Stamp/Seal
by (clearly print name of person signing form)			
Notary signature _____			

RV24 (4/14)

Montana county and state authorities reserve the right to reject any form that has been altered.
This form is available in alternate formats for people with disabilities.

STATE OF MONTANA

DEPARTMENT OF JUSTICE - MOTOR VEHICLE DIVISION
CERTIFICATE OF TITLE

pj5743

Title Nbr	Year	Make	Model	Extended Model	Style	NCIC Vehicle Type	Unladen Weight/Material
AA2074206	2007	Mercedes-Benz	S650		4D	PC	4500
VIN/HIN	MT Boat Nbr	Ton Code/Propulsion Type	Odometer	Vehicle Nbr			
WDDNG71X57A075860			36172 Miles Actual as of 04/11/2014	3408061			
Brand	Title Issue Date	Vehicle Sale Date	Transfer Reason	Attribute	Owner Tracking Nbr	Fleet Nbr	
	04/18/2014	04/11/2014	OOS Title Transfer				

Owner Name and Address
 Harry Hildibrand LLC
 2675 Palmer St Ste F
 Missoula, MT 598081741
 Customer Number: 1527132

This vehicle/vessel is subject to the following security interest:

Mail To:

Harry Hildibrand LLC
 PO Box 16270
 Missoula, MT 598086270



The vehicle/vessel may be subject to other security interests.

As the Registered Owner of the above vehicle, I transfer all right, title and interest to the vehicle to the following person, as of the date below:

Print name of buyer, whether individual or business _____ Date of Transfer (delivery of vehicle) _____

Buyer's Street Address _____ City _____ State _____ Zip _____

Federal and state law require that the owner state the mileage of a vehicle upon transfer of ownership. If you fail to complete this disclosure or provide a false statement, you may be subject to fines and/or imprisonment.

I state that this (check one) ☐ 5 ☐ or 6 digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge it reflects the actual mileage unless one of the following statements is checked.

DO NOT CHECK UNLESS APPLICABLE: ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. Warning - odometer discrepancy.

Under penalty of law, I certify the above odometer disclosure and transfer of ownership information is correct to the best of my knowledge; that I am the same person named above; and if signing for a business, I have full authority to act upon behalf of the owner, whose name appears on the upper left side of this Title. **ALL OWNERS MUST SIGN.**

Signature of Owner or Agent of Owner (Transferor) _____ Printed name - must be the same as signature (do not type) _____

X _____ Printed name - must be the same as signature (do not type) _____

Signature of Owner or Agent of Owner (if more than one) _____ Printed name - must be the same as signature (do not type) _____

X _____

State of _____ County of _____ Signed before me on (date) _____ Notary Stamp/Seal _____

by (clearly print name of person signing Title) _____

Notary signature _____ Printed name _____

Title or rank _____ Residing at _____ My commission expires _____

BUYER **ACKNOWLEDGEMENT OF MILEAGE DISCLOSURE:** I am aware of the above odometer certification made by the seller.

Signature of Buyer - only one signature is required _____ Printed name - must be the same as signature (do not type) _____

X _____

Rev. 09/10



TITLE AND REGISTRATION BUREAU
 1003 BUCKSKIN DRIVE
 DEER LODGE MT 59722-2375

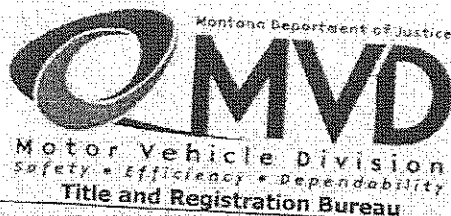
CONTROL NO. 13253437
 (This is not a title number)



KEEP IN SAFE PLACE-ANY ALTERATION-USE OF CORRECTION FLUID-ERASURE - VOIDS THIS TITLE

VERIFY PRESENCE OF WATERMARK - HOLD TO LIGHT TO VIEW

000802



Application for Certificate of Title for a Motor Vehicle

MVD Use Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 444-3661 Fax (406) 846-6039 • mvdtitleinfo@mt.gov

Fees: \$12 for light vehicles, trucks and buses weighing less than one ton;
\$10 for all other vehicles. Additional fees and taxes will be due upon registration.

Title Number:

A Applicant Section

Applicant's Legal Name (first, middle, last) or Firm Name:

HARRY HILDIBRAND, LLC

DL/FEIN/Tribal ID/Corp ID*

C162787

State where DL issued:

Co-Applicant's Legal Name (first, middle, last):

Please indicate if owner or lessee: Owner ☒ Lessee ☐

Mailing Address:

PO BOX 16270

City:

MISSOULA

State:

MT

Zip Code:

59808

County:

MISSOULA

Residential Address:

2675 PALMER STREET SUITE F

City:

MISSOULA

State:

MT

Zip Code:

59808

County:

MISSOULA

B Vehicle Section

Manufacturer's Suggested

Year:

2007

Make:

MERCEDES

Model:

S550

Style:

SD

Vehicle Identification Number:

WDDNG71X57A075860

Color:

SILVER

Fuel Type:

1

Unladen Weight:

☐ 2850 lbs. or less ☐ Over 2850 lbs

Motor Home Class:

☐ A ☐ B ☐ C

Trucks One Ton and Under:

☐ 1/4 ton ☐ 1/2 ton☐ 3/4 ton ☐ 1 ton

Trucks Over One Ton:

Manufacturer's Rated Capacity:

Trailer/Travel Trailer/Camper/Motor Home:

Declared Weight:

Length:

Motorcycle and Quadricycle:

CC:

Wheel Base:

Wheel Diameter:

☐ Street rod ☐ Kit vehicle☐ Custom vehicle☐ Specially constructed vehicle**C Is there a security interest or lien against this vehicle?**☒ No - go to Section D☐ Yes - complete this section and submit a filing fee of \$8 for each security interest or lien.

Date of First Security:

Amount:

Interest:

Name of First Secured Party or Lienholder:

DL/FEIN/Tribal ID/Corp ID*

Mailing Address of First Secured Party or Lienholder:

Date of 2nd Security:

Amount:

Interest:

Name of Second Secured Party or Lienholder:

DL/FEIN/Tribal ID/Corp ID*

Mailing Address of Second Secured Party or Lienholder:

D Odometer/Statement of Sale Section

I certify under penalty of law (MCA 45-7-203 Unsworn Falsification to Authorities) that:

- The vehicle described above was sold ☐ new ☐ used to the applicant named in Section A on (date) _____ by (printed name of seller) _____ Seller's Address: _____
- The (check one) ☐ five or ☐ six digit odometer now reads (no tenths) _____ miles, date read _____ and, to the best of my knowledge, it reflects the actual mileage **unless one of the following statements is checked:**

DO NOT CHECK UNLESS APPLICABLE

- ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
- ☐ The odometer reading is not the actual mileage. **Warning - odometer discrepancy.**

- If signing for a commercial entity, I have full authority to do so.

Dated this _____ day of _____ 20 _____

Dealer's License Number _____

Signature of Dealer's Agent - this is my legal signature _____

Printed Name of Dealer's Agent _____

E Applicant's Acknowledgement

I certify under penalty of law (MCA 45-7-203 Unsworn Falsification to Authorities) that:

- I am one of the applicants named in Section A;
- I am aware of the odometer certification made in Section D;
- I have provided the appropriate identification number to the Department;
- The statements made and information contained on this form are true and correct to the best of my knowledge, information and belief and, if signing for a commercial entity, I have full authority to do so.

Dated this 11 day of APRIL 20 14

HARRY HILDIBRAND, LLC

Signature - this is my legal signature (only one signature is required)

LISA A HAUGEN, AGENT

Printed Name of Applicant

Applicant is a Commercial Entity, Give Full Name

*DL-Driver License Number; FEIN-Federal Employer Identification Number; Tribal ID-Tribal Identification card; Corp. ID-Corporate Identification; CID-Customer Identification number

(10/12)

This form may be rejected if it has been altered and upon request is available in alternate formats

HLO-SDT 000052

DEFG

Owner Name and Address	This vehicle/vessel is subject to the following security interests:
<p data-bbox="112 550 297 569">Harry Hildibrand LLC</p> <p data-bbox="112 569 297 585">3514 American Way</p> <p data-bbox="112 585 297 602">Missoula MT 59808-1924</p> <p data-bbox="112 602 297 619">Cust/Guar Number: 1527132</p> <p data-bbox="112 709 230 726">Mail To:</p> <p data-bbox="112 737 363 753">Harry Hildibrand LLC</p> <p data-bbox="112 764 297 781">PO Box 16270</p> <p data-bbox="112 793 430 810">Missoula MT 59808-6270</p>	<p data-bbox="782 550 1412 569">This vehicle/vessel may be subject to other security interests.</p>

TITLE AND REGISTRATION BUREAU
1801 SUCKKIN DRIVE
DEER LODGE MT 59722-2272

KEEP IN SAFE PLACE-ANY ALTERATION-USE OF CORRECTION FLUID-ERASURE-VOIDS THIS CERTIFICATE

INSTRUCTIONS - READ CAREFULLY

- Purchaser applying for title is required to complete and sign Section D. The purchaser must include their dealer license number, driver license (DL), federal tax identification number (FEIN), tribal identification number (Tribal ID) or corporate identification number (Corp ID). The title must be submitted to the County assessor within 40 days of purchase - failure to do so is a violation of MCA 61-3-220 and will result in a \$10.00 penalty.
- The secured party must include their driver license, federal tax identification number, tribal identification number or corporate identification number.
- Licensed dealers may execute up to three transfers by completing Dealer Reassignment Sections A, B, and C. Insurance companies may execute one transfer by completing Section A. **WARNING:** Federal and state law requires that you transfer ownership to your purchaser and enter the mileage in connection with the transfer - failure to do so or providing a false statement is a violation of state law and may result in fines and/or imprisonment.
- Any alteration - use of correction fluid/erasure - voids this certificate.

FIRST DEALER/INSURER REASSIGNMENT

For value received I, the undersigned dealer/insurer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____ Address _____

I state that this (check one) ☐ 5 or ☐ 6 digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage **unless one of the following statements is checked:**

DO NOT CHECK ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
 UNLESS APPLICABLE ☐ The odometer reading is not the actual mileage. **Warning - odometer discrepancy.**

I certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership or insurer.

Signature of dealer/insurer (sign in ink) _____ Printed name _____

Name of dealership/insurer _____ Dealer license number or DL/FEIN/Tribal ID/Corp ID _____

A

I am aware of the above odometer certification made by the dealer or insurer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

For value received I, the undersigned dealer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____ Address _____

I state that this (check one) ☐ 5 or ☐ 6 digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage **unless one of the following statements is checked:**

DO NOT CHECK ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
 UNLESS APPLICABLE ☐ The odometer reading is not the actual mileage. **Warning - odometer discrepancy.**

I certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership.

Signature of dealer (sign in ink) _____ Printed name _____

Name of dealership _____ Dealer license number _____

B

I am aware of the above odometer certification made by the dealer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

For value received I, the undersigned dealer, transfer ownership of the vehicle/vessel described on this certificate of title to:

Print name of purchaser(s) _____ Address _____

I state that this (check one) ☐ 5 or ☐ 6 digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge that it reflects the actual mileage **unless one of the following statements is checked:**

DO NOT CHECK ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
 UNLESS APPLICABLE ☐ The odometer reading is not the actual mileage. **Warning - odometer discrepancy.**

I certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, and I have full authority to sign for the dealership.

Signature of dealer (sign in ink) _____ Printed name _____

Name of dealership _____ Dealer license number _____

C

I am aware of the above odometer certification made by the dealer. Print business name _____

Date of sale _____ Signature of purchaser _____ Printed name (do not type) _____

I state that I have compared the manufacturer's vehicle/vessel identification number shown on the face of this certificate with the manufacturer's vehicle/vessel identification plate affixed to the vehicle/vessel and they agree in every particular. This vehicle/vessel is subject to the security interest(s) shown below. Write "NONE" if no security interest exists: _____

First Secured Party _____ Security Interest Date _____

Address _____ DL/FEIN/Tribal ID/Corp ID _____

Second Secured Party _____ Security Interest Date _____

Address _____ DL/FEIN/Tribal ID/Corp ID _____

I certify under penalty of law (MCA 45-7-203, Unsworn Falsification to Authorities) that the statements made on this certificate are true and correct to the best of my knowledge, information and belief, that I am the same person(s) named below in this purchase(s) application, and if signing for a commercial entity or trust, I have full authority to do so.

Printed or typed name of purchaser/owner/business (1) _____ Printed or typed name of purchaser/owner (2) _____

Mailing address - purchaser 1 _____ Residence address - purchaser 1 (must be street or rural route) _____ City or town _____ State _____ Zip _____

Mailing address - purchaser 2 _____ Residence address - purchaser 2 (must be street or rural route) _____ City or town _____ State _____ Zip _____

D

Legal signature of purchaser/owner _____ Dealer License Number _____ DL/FEIN/Tribal ID/Corp ID purchaser (1) _____ DL/FEIN/Tribal ID/Corp ID purchaser (2) _____ Date _____
 (sign in ink, only one signature required)



**State of Montana
Attention Vehicle Owner**



This registration receipt must be in the motor vehicle or trailer to which it pertains at all times. The driver or person in control of the vehicle or trailer must display this receipt to a peace officer or any officer or employee of the Montana Department of Justice or Department of Transportation, upon demand of the officer or employee.

Montana law requires the owner of any motor vehicle that is registered and operated on a public highway or a private way commonly used by the public in this state to continuously maintain mandatory motor vehicle liability insurance in the amounts specified by law. Unless this vehicle qualifies for an exemption under Mont. Code Ann. § 61-6-303, such as a motorcycle or quadricycle, mandatory motor vehicle liability insurance is required.

Proof of compliance with the mandatory liability insurance law must be in the motor vehicle. The owner or driver of the motor vehicle must display the insurance card or other proof of compliance to any peace officer, judge or other authorized individual upon demand. Violation of this requirement is a misdemeanor that carries the same penalties as a no insurance violation.

Next time, you may renew your vehicle registration online at <https://app.mt.gov/vrr/>

Public Safety is a Partnership: Buckle Up Slow Down - Dont Drink and Drive

dojmt.gov/driving

Montana Vehicle Registration

Valid Through Date 12/31/9999

Renewal Cust Nbr 1527132

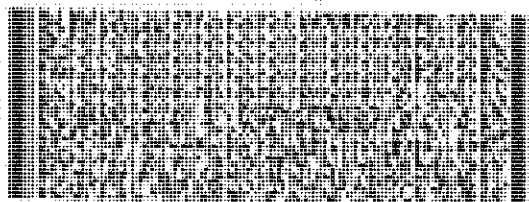
County	Missoula	Issue Date	07/28/2016	Tab Nbr	
Usage	Regular	User	pj04a008	Plate Nbr	BSU738
Reg Usage	Regular	Fleet Nbr		Plate Type	Std County Perm 2013 Small (MC)
Reg Type	Permanent	OTN			

Owners / Lessors

Harry Hildibrand LLC
3011 American Way
Missoula, MT 598081921

VIN	JKBZXNH15GA000728	Year	2016	Make	Kawasaki	Model	Zx1400
Veh Type	Motorcycle (MC)	Style	MC	Color	Green	Ext Model	
Weight		Ton Code		Veh Attr	Street Legal	Veh Nbr	3915955
Decl GVW		GVW Class		GVW Beg		GVW End	

Harry Hildibrand LLC
PO Box 16270
Missoula, MT 598086270



By Registering this vehicle the applicant acknowledges having knowledge of the FMCSR and FHMR, if applicable.

MERLIN: Financial Statement

Page 1 of 1

Motor Vehicle Division
200 W Broadway
Missoula, MT 59802

Financial Statement: 11967405

Original

Customer Information

Name: Harry Hildibrand LLC
 Address: Harry Hildibrand LLC
 PO Box 16270
 Missoula, MT 598086270

Statement Information

Date: 7/28/2016 2:16:53 PM
 Location: Missoula County
 Created By: pj04a008
 Customer #: 1527132

Comment:

Additional Customers**Transaction Information**

Description	Amount	
Motorcycle 2016 Kawasaki Zx1400, JKBZXNH15GA000728 (Title And Registration)	\$94.25	
Product	Quantity	Amount
Motorcycle / Quadricycle Street Legal Registration Fee	1	\$53.25
MHP Salary and Retention Fee	1	\$5.00
Motorcycle / Quadricycle Safety Fee	1	\$16.00
State Title Fee (excl Lt Veh)	1	\$10.00
Standard County Perm Small Initial Non Personalized Plate 2010	1	\$10.00
Total Due:		\$94.25

Payment Information

Payment Type	Customer	Customer #	Payment #	Ref #	Amount
CTO Third Party Payment	Harry Hildibrand LLC	1527132			\$94.25
Total Tendered:					\$94.25
Cash Back (N/A):					\$0.00

Please retain this financial statement for your records. It may contain important tax information.

HLO-SDT 000056 272



Application for Certificate of Title for a Motor Vehicle

MVD Use Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 444-3661 Fax (406) 846-6039 • mvdtitleinfo@mt.gov

Fees: \$12 for light vehicles, trucks and buses weighing less than one ton;
\$10 for all other vehicles. Additional fees and taxes will be due upon registration.

Title Number:

A Applicant Section	Applicant's Legal Name (first, middle, last) or Firm Name: HARRY HILDIBRAND, LLC		DL/FEIN/Tribal ID/Corp ID* C162787	
	Co-Applicant's Legal Name (first, middle, last):		State where DL issued:	
B Vehicle Section	Mailing Address: PO BOX 16270	City: MISSOULA	State: MT	DL/FEIN/Tribal ID/Corp ID* 59808
	Residential Address: 3011 AMERICAN WAY	City: MISSOULA	State: MT	State where DL issued: MISSOULA
	Manufacturer's Suggested Retail Price: \$	Year: 2016	Make: KAWASAKI	Model: ZX1400
	Vehicle Identification Number: JKBZXNH15GA000728	Color: GREEN	Fuel Type: 1	Unladen Weight: 2850 lbs or less
Trucks One Ton and Under: <input checked="" type="radio"/> 1/4 ton <input type="radio"/> 1/2 ton <input type="radio"/> 3/4 ton <input type="radio"/> 1 ton		Trucks Over One Ton: Manufacturer's Rated Capacity:	Trailer/Travel Trailer/Camper/Motor Home: Declared Weight: Length:	Motorcycle and Quadricycle: CC: 1400 Wheel Base: Wheel Diameter:
Motor Home Class: <input checked="" type="radio"/> A <input type="radio"/> B <input type="radio"/> C		Street rod <input type="radio"/> K/R vehicle <input type="radio"/> Custom vehicle <input type="radio"/> Specialty constructed vehicle		

C Is there a security interest or lien against this vehicle?

No - go to Section D

Yes - complete this section and submit a filing fee of \$8 for each security interest or lien.

Date of First Security Interest:	Amount \$	Name of First Secured Party or Lienholder:	DL/FEIN/Tribal ID/Corp ID*
Mailing Address of First Secured Party or Lienholder:		City:	State: Zip Code:
Date of 2nd Security Interest:	Amount \$	Name of Second Secured Party or Lienholder:	DL/FEIN/Tribal ID/Corp ID*
Mailing Address of Second Secured Party or Lienholder:		City:	State: Zip Code:

D Odometer/Statement of Sale Section

Under penalty of law (MCA 45-7-263), I certify that:

- The vehicle described above was sold ☐ new ☐ used to the applicant named in Section A on (date) _____ by (printed name of seller) _____ Seller's Address: _____
- The (check one) ☐ five or ☐ six digit odometer now reads (no tenths) _____ miles, date read _____ and, to the best of my knowledge, it reflects the actual mileage **unless one of the following statements is checked:**

DO NOT CHECK UNLESS APPLICABLE

- ☐ The odometer reading reflects the amount of mileage **in excess of its mechanical limits.**
- ☐ The odometer reading is not the actual mileage. **Warning - odometer discrepancy.**

If signing for a business entity or trust, I have full authority to do so.

Dated this _____ day of _____ 20____

Dealer's License Number

Signature of Dealer's Agent - this is my legal signature

Dealer's Firm Name

Printed Name of Dealer's Agent

E Applicant's Acknowledgement

Under penalty of law (MCA 45-7-263), I certify that:

- I am one of the applicants named in Section A;
- I am aware of the odometer certification made in Section D;
- I have provided the appropriate identification number to the Department;
- The statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief; I am the person named on this form; and, if signing for a business entity or trust, I have full authority to do so.

Dated this **28** day of **JULY** 20 **16****HARRY HILDIBRAND, LLC**

If Applicant is a Business Entity, Give Full Name

Signature - this is my legal signature (only one signature is required)

LISA A HAUGEN, AGENT

Printed Name of Applicant



Statement of Fact

Print Form

MVD Use Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 444-3661 Fax (406) 846-6039 • mvdtitleinfo@mt.gov

The Statement of Fact (form MV100) may be used for the purpose of a:

- No interest statement
- Cancellation of sale statement
- Letter of consent
- Relinquishment statement
- Statement of error
- No security interest or lien to file statement
- Request to update customer record residential/mailling address
- Special mailing authorization (titles will be mailed to out-of-state addresses only)
- Legal signature statement
- Letter of explanation
- One and the same statement*

Printed name of person making statement and name of firm or corporation Lisa A Haugen, Agent

Year 2016	Make Kawasaki	Title Number
Vehicle/Vessel Identification No: J K B Z X N H 1 5 G A 0 0 0 7 2 8		

Statement HARDY HILDBRAND, LLC AND HARRY HILDBRAND, LLC are one and the same.
no fraud intended.

* Indicate how name is to be entered on the Title: HARRY HILDBRAND, LLC

Under penalty of law (MCA 45-7-203), I certify that the statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief; I am the person named on this form; and, if signing for a business entity or trust, I have full authority to do so.

Signature *Lisa A Haugen* Date 7/28/16
This is my legal signature

Printed name Lisa A Haugen, Agent



VEHICLE/VESSEL TRANSFER AND REASSIGNMENT FORM

INSTRUCTIONS ON REVERSE SIDE — ALL SIGNATURES MUST BE IN INK — PHOTOCOPIES NOT ACCEPTED

This form is not the ownership certificate. It must accompany the titling document or Application for Duplicate Title. For Car Buyer's Bill of Rights, visit www.dmv.ca.gov.

ACQUISITION NUMBER (DISMANTLER ONLY)

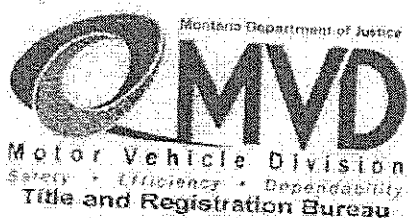
SECTION 1 — VEHICLE/VESSEL DESCRIPTION				
IDENTIFICATION NUMBER	YEAR/MODEL	MAKE	LICENSE PLATE/CF NO.	MOTORCYCLE ENGINE NUMBER
JKRZXNH15GA000728	2016	KAWASAKI		ZXT40EE021812

SECTION 2 — BILL OF SALE				
I/We <u>Del Amo Motorsports</u> sell, transfer, and deliver the above vehicle/vessel				
to <u>HARRY HILDBRAND LLC</u> on <u>07</u> <u>26</u> <u>2016</u> for the amount of <u>\$ \$11,616.50</u>				
(SELLING PRICE)				
If this was a gift, indicate relationship: _____ (e.g., parents, spouse, friend, etc.) <u>\$</u>				
(GIFT VALUE)				

SECTION 3 — ODOMETER DISCLOSURE STATEMENT (Void if Mileage is Altered or Erased)				
Federal and State Law requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.				
The odometer now reads <u>000003</u> (no tenths) miles, and to the best of my knowledge reflects the ACTUAL mileage unless one of the following statements is checked.				
<input type="checkbox"/> Odometer reading is NOT the actual mileage <input type="checkbox"/> Mileage EXCEEDS the odometer mechanical limits				
Explain odometer discrepancy: _____				

SECTION 4 — BUYER AND SELLER (MUST hand print his or her name, date and sign this section.)				
BUYER'S SECTION				
I acknowledge the odometer reading and the facts of the transfer. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
PRINT BUYER'S NAME	SIGNATURE	DATE	DL/DL OR DEALER/DISM #	
	X	7/26/2016	2000168087	
PRINT BUYER'S NAME	SIGNATURE	DATE	DL/DL OR DEALER/DISM #	
	X	7/26/2016		
PRINT BUYER'S NAME	SIGNATURE	DATE	DL/DL OR DEALER/DISM #	
	X			
BUYER'S MAILING ADDRESS	CITY	STATE	ZIP CODE	DAYTIME TELEPHONE NO.
3011 AMERICAN WAY	MISSOULA	MT	59808	310-490-4499
SELLER'S SECTION				
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
PRINT SELLER'S NAME	SIGNATURE	DATE	DL/DL OR DEALER/DISM #	
Del Amo Motorsports	X <i>Markell</i>	7/26/2016	20385	
PRINT SELLER'S NAME	SIGNATURE	DATE	DL/DL OR DEALER/DISM #	
	X			
PRINT SELLER'S NAME	SIGNATURE	DATE	DL/DL OR DEALER/DISM #	
	X			
SELLER'S MAILING ADDRESS	CITY	STATE	ZIP CODE	DAYTIME TELEPHONE NO.
2500 Marine Ave	Redondo Beach	CA	90278	310-220-2223

SECTION 5 — POWER OF ATTORNEY				
I/We <u>HARRY HILDBRAND LLC</u> appoint <u>Del Amo Motorsports</u>				
as my attorney in fact, to complete all necessary documents, as needed, to transfer ownership as required by law.				
SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY		DATE		
X		7/26/2016		
SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY		DATE		
X		7/26/2016 275		



Odometer Disclosure Statement

Office Use Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 846-6000 Fax (406) 846-6039 • mvdtitleinfo@mt.gov

Required on vehicles nine years old or newer.
A vehicle having a gross weight rating of more than 16,000 pounds is exempt.
This form must be completed in its entirety.

Year 2016	Make/Manufacturer KAWASAKI	Model	Type MC
Vehicle Identification Number: J K B Z X N H I 5 6 A 0 0 0 7 2 E			
Federal law (and state law, if applicable) requires that you state the mileage (odometer reading) upon transfer or ownership. Failure to do so, or providing a false statement, may result in fines and/or imprisonment.			
I state that this (check one) 5 <input type="checkbox"/> or 6 <input type="checkbox"/> digit odometer now reads 3 (no tenths) miles, and, to the best of my knowledge, it reflects the actual mileage unless one of the following statements is checked:			
DO NOT CHECK UNLESS APPLICABLE		<input type="checkbox"/> The odometer reading reflects the amount of mileage in excess of its mechanical limits.	
		<input type="checkbox"/> The odometer reading is not the actual mileage. Warning -- odometer discrepancy.	
Signature of Transferor (seller) * [Signature]		Date 07-28-16	
Printed Name of Transferor (seller) Del Amo Motorsports		Street Address of Transferor (seller) 2500 Marine Ave	
City, State and Zip Code of Transferor (seller) Redondo Beach CA, 90278			
Signature of Transferee (buyer) [Signature]		Date 7/28/16	
Printed Name of Transferee (buyer) HARRY HILDBRAND, III		Street Address of Transferee (buyer) 3011 American Way	
City, State and Zip Code of Transferee (buyer) Missoula, MT 59808			

White copy - county treasurer
Yellow copy - applicant
Pink copy - dealer

MV90A (07/06)

Montana county and state authorities reserve the right to reject any form that has been altered
This form is available in alternate formats for people with disabilities

Privilege Log

Document Type	Date of Document	Author/Capacity	Recipient	Persons with access	Subject Matter	Category of Privilege
Jurat	11/15/2016	James P. Foust	State of California	Public	Statement confirming date and location of document signature	Attorney-Client
Bill of Sale Vehicle Transfer and Reassignment Form	11/15/2016	Old Reliable Tractor, Inc.	Harry Hildibrand, LLC	Buyer and Seller of property	Bill of Sale for vehicle	Attorney-Client
	7/26/2016	Del Amo Motorsports	Harry Hildibrand, LLC	Buyer and seller of property	Transfer and reassignment of vehicle	Attorney-Client
Bill of Sale Vehicle Transfer and Reassignment Form	12/3/2014	JPF Enterprises	Harry Hildibrand, LLC	Buyer and seller of property	Bill of Sale for vehicle	Attorney-Client
	10/20/2014	JPF Enterprises	South Bay Autos 3	Buyer and seller of property	Transfer and reassignment of vehicle	Attorney-Client
Bill of Sale	3/31/2014	James P. Foust	Harry Hildibrand, LLC	Buyer and seller of property	Bill of Sale for vehicle	Attorney-Client
Certificate of Title Vehicle Transfer and Reassignment Form	2/16/2014	State of California	James P. Foust	James P. Foust	Vehicle title	Attorney-Client
Vehicle Transfer and Reassignment Form	1/20/2014	Mercedes Benz of Beverly Hills	James P. Foust	Buyer and seller of property	Transfer and reassignment of vehicle	Attorney-Client
Vehicle Transfer and Reassignment Form	12/3/2014	Elidia Muciu	Mercedes Benz of Beverly Hills	Buyer and seller of property	Transfer and reassignment of vehicle	Attorney-Client

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los AngelesOn 11/15/16 before me, Romeo Sagastume, Notary Public

Date

Here Insert Name and Title of the Officer

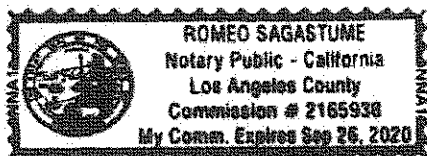
personally appeared James P. Foust, Jr

Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature

Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Bill of SaleDocument Date: _____ Number of Pages: one

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: James P. Foust, Jr☐ Corporate Officer — Title(s): _____☐ Partner — ☐ Limited ☐ General☒ Individual ☐ Attorney in Fact☐ Trustee ☐ Guardian or Conservator☐ Other: _____

Signer Is Representing: _____

Signer's Name: _____

☐ Corporate Officer — Title(s): _____☐ Partner — ☐ Limited ☐ General☐ Individual ☐ Attorney in Fact☐ Trustee ☐ Guardian or Conservator☐ Other: _____

Signer Is Representing: _____



Bill of Sale

Office Use
Only

Title and Registration Bureau

P.O. Box 201431, 302 N Roberts, Helena, MT 59620-1431

Phone (406) 444-3661 Fax (406) 444-0116 • mvdtitleinfo@mt.gov

*** This form must be completed in its entirety. ***

As recorded on this form, I received the sum of Value Received dollars

(\$ N/A) and other valuable consideration to sell, transfer and deliver to

Purchaser HARRY HILDIBRAND, LLC DL/FEIN/Tribal ID/Corp ID* C162787

Address 3011 American Way Missoula, MT 59808

my right, title and interest to the following described vehicle/vessel:

Year 1966 Make Ford Model Thunderbird Style 2D

Vehicle/Hull Identification No. 6Y85Z104010 License Plate No. _____

Salvage vehicle (must be 15 years old or older): ☐ Yes ☒ No

Sold for parts only: Yes ☐ No ☒

Odometer Statement

The (check one) ☐ five or ☐ six digit odometer now reads (no tenths) _____ miles, date read _____ and to the best of my knowledge it reflects the actual mileage unless one of the following statements is checked:

**DO NOT CHECK
UNLESS APPLICABLE**

- ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits.
☐ The odometer reading is not the actual mileage. Warning - odometer discrepancy.

I (purchaser) am aware of the odometer certification made by the seller above.

Purchaser's signature [Signature] Date _____
This is my legal signature

Purchaser's printed name HARRY HILDIBRAND, LLC

Electronic title acknowledgement if electronic record transfer is required in accordance with MCA 61-3-220(1)(a) & (2), I certify that:

- I am not in possession of the title.
- I am the owner of this vehicle and I authorize the transfer to the above-named purchaser.
- I have not previously transferred to another person for sale.

I further certify that:

- I have the right to sell the vehicle/vessel described above and will warrant and defend the title against the claims and demands of all persons except the secured party noted on the Montana title application.
- Under penalty of law (MCA 45-7-203), I certify that the statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief; I am the person named on this form; and, if signing for a business entity or trust, I have full authority to do so.

Seller's signature [Signature] Date 11/15/2016
This is my legal signature (All owners must sign)

Seller's printed name Old Reliable Tractor Inc DL/FEIN/Tribal ID/Corp ID* _____

If signing for a business entity, give full entity name

Address 50 Main Street Bowman, ND 58623

*DL=Driver License No.; FEIN=Federal Employee Identification No.; Tribal ID=Tribal Identification Card No.; Corp ID=Corporate Identification No.

Notary Use Only:

State of _____	County of _____	Signed before me on (date) _____	Notary Stamp/Seal
by (clearly print name of person signing form) <u>James P Foust</u>			
Notary signature _____			



VEHICLE/VESSEL TRANSFER AND REASSIGNMENT FORM

INSTRUCTIONS ON REVERSE SIDE — ALL SIGNATURES MUST BE IN INK — PHOTOCOPIES NOT ACCEPTED
 This form is not the ownership certificate. It must accompany the titling document or Application for Duplicate Title. For Car Buyer's Bill of Rights, visit www.dmv.ca.gov.

ACQUISITION NUMBER (DISMANTLER ONLY)

SECTION 1 — VEHICLE/VESSEL DESCRIPTION

IDENTIFICATION NUMBER	YEAR MODEL	MAKE	LICENSE PLATE/CF NO.	MOTORCYCLE ENGINE NUMBER
JKBZXNH15GA000728	2016	KAWASAKI		ZXT40EE021812

SECTION 2 — BILL OF SALE

I/We Del Amo Motorsports sell, transfer, and deliver the above vehicle/vessel
PRINT SELLER'S NAME(S)

to HARDY HILDBRAND LLC on 07 28 2016 for the amount of \$ \$11,616.50
PRINT BUYER'S NAME(S) MO DAY YEAR (SELLING PRICE)

If this was a gift, indicate relationship: _____ (e.g., parents, spouse, friend, etc.) \$
(GIFT VALUE)

SECTION 3 — ODOMETER DISCLOSURE STATEMENT (Void if Mileage is Altered or Erased)

Federal and State Law requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

The odometer now reads 000003 (no tenths) miles, and to the best of my knowledge reflects the ACTUAL mileage unless one of the following statements is checked.

WARNING — ODOMETER DISCREPANCY

- ☐ Odometer reading is NOT the actual mileage ☐ Mileage EXCEEDS the odometer mechanical limits
- Explain odometer discrepancy: _____

SECTION 4 — BUYER AND SELLER (MUST hand print his or her name, date and sign this section.)

BUYER'S SECTION

I acknowledge the odometer reading and the facts of the transfer. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINT BUYER'S NAME <u>HARRY HILDBRAND LLC</u>	SIGNATURE <u>[Signature]</u>	DATE <u>7/26/2016</u>	DL/D OR DEALER/DISM # <u>2000168087</u>
PRINT BUYER'S NAME <u>JAMES D. FOUST</u>	SIGNATURE <u>[Signature]</u>	DATE <u>7/26/2016</u>	DL/D OR DEALER/DISM #
PRINT BUYER'S NAME	SIGNATURE	DATE	DL/D OR DEALER/DISM #
BUYER'S MAILING ADDRESS <u>3011 AMERICAN WAY</u>	CITY <u>MISSOULA</u>	STATE <u>MT</u>	ZIP CODE <u>59805</u>
			DAYTIME TELEPHONE NO. <u>310-490-4499</u>

SELLER'S SECTION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINT SELLER'S NAME <u>Del Amo Motorsports</u>	SIGNATURE <u>[Signature]</u>	DATE <u>7/26/2016</u>	DL/D OR DEALER/DISM # <u>20395</u>
PRINT SELLER'S NAME	SIGNATURE	DATE	DL/D OR DEALER/DISM #
PRINT SELLER'S NAME	SIGNATURE	DATE	DL/D OR DEALER/DISM #
SELLER'S MAILING ADDRESS <u>2500 Marine Ave</u>	CITY <u>Redondo Beach</u>	STATE <u>CA</u>	ZIP CODE <u>90278</u>
			DAYTIME TELEPHONE NO. <u>310-220-2223</u>

SECTION 5 — POWER OF ATTORNEY

I/We HARDY HILDBRAND LLC appoint Del Amo Motorsports
PRINT NAME(S) PRINT NAME(S)

as my attorney in fact, to complete all necessary documents, as needed, to transfer ownership as required by law.

SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY <u>[Signature]</u>	DATE <u>7/26/2016</u>
SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY <u>[Signature]</u>	DATE <u>7/26/2016</u>



Bill of Sale

Office Use Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 444-3661 Fax (406) 846-6039 • mydtitleinfo@mt.gov

*** This form must be completed in its entirety. ***

As recorded on this form, I received the sum of VALUE RECEIVED dollars

(\$N/A) and other valuable consideration to sell, transfer and deliver to

Purchaser HARRY HILDIBRAND, LLC

DL/FEIN/Tribal ID/Corp ID# C162787

Address 2675 PALMER STREET SUITE F

my right, title and interest to the following described vehicle/vessel:

Year 2000 Make GMC Model YUKON Style LL

Vehicle/Hull Identification No. 1GKEK13T9YJ174042 License Plate No. _____

Salvage vehicle (must be 15 years old or older): ☐ Yes ☒ No

Sold for parts only: Yes ☐ No ☒

Odometer Statement

The (check one) ☐ five or ☒ six digit odometer now reads (no tenths) 157895 miles, date read 10/20/14 and to the best of my knowledge it reflects the actual mileage unless one of the following statements is checked:

DO NOT CHECK UNLESS APPLICABLE ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits. ☐ The odometer reading is not the actual mileage. Warning - odometer discrepancy.

I (purchaser) am aware of the odometer certification made by the seller above.

Purchaser's signature [Signature] Date _____
This is my legal signature.

Purchaser's printed name: HARRY HILDIBRAND, LLC

Electronic title acknowledgement if electronic record transfer is required in accordance with MCA 61-3-220(1)(a) & (2). I certify that:

- I am not in possession of the title.
- I am the owner of this vehicle and I authorize the transfer to the above-named purchaser.
- I have not previously transferred to another person for sale.

I further certify that:

- I have the right to sell the vehicle/vessel described above and will warrant and defend the title against the claims and demands of all persons except the secured party noted on the Montana title application.
- Under penalty of law (MCA 45-7-203), I certify that the statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief; I am the person named on this form; and, if signing for a business entity or trust, I have full authority to do so.

→ Seller's signature [Signature] Date 12/3/2014
This is my legal signature (MT owners must sign)

Seller's printed name JPF ENTERPRISES

DL/FEIN/Tribal ID/Corp ID# _____

Address 10821 Woodstream Ct. Las Vegas, NV 89135

*DL=Driver License No.; FEIN=Federal Employee Identification No.; Tribal ID=Tribal Identification Card No.; Corp ID=Corporate Identification No.

Notary Use Only:		
State of <u>CA</u>	County of <u>Los Angeles</u>	Signed before me on (date) <u>12/3/2014</u>
by (clearly print name of person signing form) <u>JAMES P. FOUST</u>		
Notary signature <u>[Signature]</u>		

MTV24 (4/14)

Montana county and state authorities reserve the right to reject any form that has been altered. This form is available in alternate formats for people with disabilities.



VEHICLE/VESSEL TRANSFER AND REASSIGNMENT FORM

INSTRUCTIONS ON REVERSE SIDE — ALL SIGNATURES MUST BE IN INK — PHOTOCOPIES NOT ACCEPTED
 This form is not the ownership certificate. It must accompany the titling document or Application for Duplicate Title. For Car Buyer's Bill of Rights, visit www.dmv.ca.gov.

ACQUISITION NUMBER (DISMANTLER ONLY)

SECTION 1 — VEHICLE/VESSEL DESCRIPTION

IDENTIFICATION NUMBER	YEAR MODEL	MAKE	LICENSE PLATE/CF NO.	MOTORCYCLE ENGINE NUMBER
1GKEK13T9YJ174042	2000 YUKON	GMC	6YPD850	

SECTION 2 — BILL OF SALE

I/We SOUTH BAY AUTOS 3 sell, transfer, and deliver the above vehicle/vessel
PRINT SELLER'S NAME(S)

to JPF ENTERPRISE on 10 20 2014 for the amount of \$ 5204.00
PRINT BUYER'S NAME(S) MO DAY YEAR (SELLING PRICE)

If this was a gift, indicate relationship: _____ (e.g., parents, spouse, friend, etc.) \$ 0.00
(GIFT VALUE)

SECTION 3 — ODOMETER DISCLOSURE STATEMENT (Void if Mileage is Altered or Erased)

Federal and State Law requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

The odometer now reads 157895 (no tenths) miles, and to the best of my knowledge reflects the **ACTUAL** mileage unless one of the following statements is checked.

WARNING—ODOMETER DISCREPANCY

- ☐ Odometer reading is **NOT** the actual mileage ☐ Mileage **EXCEEDS** the odometer mechanical limits
- Explain odometer discrepancy: _____

SECTION 4 — BUYER AND SELLER (MUST hand print his or her name, date and sign this section.)

BUYER'S SECTION

I acknowledge the odometer reading and the facts of the transfer. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINT BUYER'S NAME JPF ENTERPRISE	SIGNATURE <u>[Signature]</u>	DATE 10/20/2014	DL/ID OR DEALER/DISM #
PRINT BUYER'S NAME	SIGNATURE <u>X</u>	DATE	DL/ID OR DEALER/DISM #
PRINT BUYER'S NAME	SIGNATURE <u>X</u>	DATE	DL/ID OR DEALER/DISM #
BUYER'S MAILING ADDRESS 10821 WOODSTREAM CT	CITY LAS VEGAS	STATE NV	ZIP CODE 89135
			DAYTIME TELEPHONE NO. (310) 490-4499

SELLER'S SECTION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINT SELLER'S NAME SOUTH BAY AUTOS 3	SIGNATURE <u>[Signature]</u>	DATE 10/20/2014	DL/ID OR DEALER/DISM # 45575
PRINT SELLER'S NAME	SIGNATURE <u>X</u>	DATE	DL/ID OR DEALER/DISM #
PRINT SELLER'S NAME	SIGNATURE <u>X</u>	DATE	DL/ID OR DEALER/DISM #
SELLER'S MAILING ADDRESS 11545 CARSON ST.	CITY LAKWOOD	STATE CA	ZIP CODE 90715
			DAYTIME TELEPHONE NO. (562) 402-0422

SECTION 5 — POWER OF ATTORNEY

I/We JPF ENTERPRISE appoint SOUTH BAY AUTOS 3
PRINT NAME(S) PRINT NAME(S)

as my attorney in fact, to complete all necessary documents, as needed, to transfer ownership as required by law.

SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY <u>[Signature]</u>	DATE 10/20/2014
SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY <u>X</u>	DATE 10/20/2014



Bill of Sale

Office Use
Only

1003 Buckskin Drive, Deer Lodge, MT 59722-2375 • Phone (406) 444-3661 Fax (406) 846-6039 • mvdtitleinfo@mt.gov

*** This form must be completed in its entirety. ***

As recorded on this form, I received the sum of VALUE RECEIVED dollars

(\$N/A) and other valuable consideration to sell, transfer and deliver to

Purchaser HARRY HILDBRAND, LLC DL/FEIN/Tribal ID/Corp ID* C162787

Address 2675 PALMER STREET SUITE F MISSOULA, MT 59808

my right, title and interest to the following described vehicle/vessel:

Year 2007 Make MERCEDES Model S550 Style SD

Vehicle/Hull Identification No. WDDNG71X57A075860 License Plate No. _____

Salvage vehicle (must be 15 years old or older): ☐ Yes ☒ No

Sold for parts only: Yes ☐ No ☒

Odometer Statement

The (check one) ☐ five or ☒ six digit odometer now reads (no tenths) 36,172 miles, date read _____ and to the best of my knowledge it reflects the actual mileage unless one of the following statements is checked:

DO NOT CHECK UNLESS APPLICABLE ☐ The odometer reading reflects the amount of mileage in excess of its mechanical limits. ☐ The odometer reading is not the actual mileage. **Warning - odometer discrepancy.**

I, (purchaser) am aware of the odometer certification made by the seller above.

Purchaser's signature [Signature] Date _____
This is my legal signature

Purchaser's printed name HARRY HILDBRAND, LLC

Electronic title acknowledgement if electronic record transfer is required In accordance with MCA 61-3-220(1)(a) & (2), I certify that:

- I am not in possession of the title.
- I am the owner of this vehicle and I authorize the transfer to the above-named purchaser.
- I have not previously transferred to another person for sale.

I further certify that:

- I have the right to sell the vehicle/vessel described above and will warrant and defend the title against the claims and demands of all persons except the secured party noted on the Montana title application.
- Under penalty of law (**MCA 45-7-203 Unsworn Falsification to Authorities**) the statements made on this form are true and correct to the best of my knowledge, information and belief, and if signing for a commercial entity, I have full authority to do so.

Seller's signature [Signature] Date 3/31/14
This is my legal signature (All owners must sign)

Seller's printed name JAMES P FOUST JR DL/FEIN/Tribal ID/Corp ID* _____
If signing for a commercial entity, give full entity name

Address 10821 WOODSTREAM CT LAS VEGAS, NV 89135

*DL=Driver License No.; FEIN=Federal Employee Identification No.; Tribal ID=Tribal Identification Card No.; Corp ID=Corporate Identification No.

Notary Use Only:

State of <u>NV</u>	County of <u>Clark</u>	Signed before me on (date) <u>3-31-14</u>	
by (clearly print name of person signing form) <u>James Foust</u>			
Notary signature <u>[Signature]</u>	Printed name <u>Alexis Maclean</u>		
Rank <u>Banker</u>	Residing at <u>US Bank</u>	My commission expires <u>11/4/17</u>	

STATE OF CALIFORNIA

CERTIFICATE OF TITLE

LE5040791084

AUTOMOBILE

VINCL75L4J01425L

2004 VOLV

SKLEPUS

NONE

10/05/2008

2004 CA

07/18/04

10/03/2004

ACTUAL MILEAGE

1000 MI

FOUST JAMES P
7 AVENIDA DE MAGNOLIA
RINCHO PLS VRO CA 90275

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I AM A NOTARY PUBLIC IN THE STATE OF CALIFORNIA.

10/18/04 X *[Signature]*

NOTARY PUBLIC

IMPORTANT READ CAREFULLY

CA 120187033

KEEP IN A SAFE PLACE VOID IF ALTERED



VEHICLE/VESSEL TRANSFER AND REASSIGNMENT FORM

Deal no. 112123

INSTRUCTIONS ON REVERSE SIDE — ALL SIGNATURES MUST BE IN INK — PHOTOCOPIES NOT ACCEPTED
 This form is not the ownership certificate. It must accompany the titling document or Application for Duplicate Title. For Car Buyer's Bill of Rights, visit www.dmv.ca.gov.

ACQUISITION NUMBER (DISMANTLER ONLY)

SECTION 1 — VEHICLE/VESSEL DESCRIPTION

IDENTIFICATION NUMBER	YEAR/MODEL	MAKE	LICENSE PLATE/CF NO.	MOTORCYCLE ENGINE NUMBER
WDDNG71X57A075860	2007 S550V	MERCEDES	5XCR849	

SECTION 2 — BILL OF SALE

I/We MERCEDES BENZ OF BEVERLY HILLS sell, transfer, and deliver the above vehicle/vessel
 PRINT SELLER'S NAME(S)
JAMES P FOUST JR
 PRINT BUYER'S NAME(S)
 to 01 20 20 01 14 for the amount of \$ Value Rec'd
 MO DAY YEAR (SELLING PRICE)
 If this was a gift, indicate relationship: _____ (e.g., parents, spouse, friend, etc.) \$ N/A
 (GIFT VALUE)

SECTION 3 — ODOMETER DISCLOSURE STATEMENT (Void if Mileage is Altered or Erased)

Federal and State Law requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

The odometer now reads 36,172 (no tenths) miles, and to the best of my knowledge reflects the **ACTUAL** mileage unless one of the following statements is checked.

WARNING — ODOMETER DISCREPANCY

- ☐ Odometer reading is **NOT** the actual mileage ☐ Mileage **EXCEEDS** the odometer mechanical limits
 Explain odometer discrepancy: _____

SECTION 4 — BUYER AND SELLER (MUST hand print his or her name, date and sign this section.)

BUYER'S SECTION

I acknowledge the odometer reading and the facts of the transfer. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINT BUYER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #
<u>JAMES P. FOUST</u>	<u>X</u> <u>James P. Foust</u>	<u>01/20/14</u>	<u>2000168087</u>
PRINT BUYER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #
PRINT BUYER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #
BUYER'S MAILING ADDRESS	CITY	STATE	ZIP CODE
<u>10821 WOODSTREAM CT</u>	<u>LAS VEGAS NV</u>	<u>89135</u>	<u>(310)490-4499</u>

SELLER'S SECTION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINT SELLER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #
<u>MERCEDES BENZ OF BEVERLY HILLS</u>	<u>X</u>	<u>01/20/14</u>	<u>61447</u>
PRINT SELLER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #
PRINT SELLER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #
SELLER'S MAILING ADDRESS	CITY	STATE	ZIP CODE
<u>9250 BEVERLY BLVD</u>	<u>BEVERLY HILLS CA</u>	<u>90210</u>	<u>3106592980</u>

SECTION 5 — POWER OF ATTORNEY

I/We JAMES P FOUST JR appoint MERCEDES BENZ OF BEVERLY H
 PRINT NAME(S) PRINT NAME(S)
 as my attorney in fact, to complete all necessary documents, as needed, to transfer ownership as required by law.
 SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY James P. Foust DATE 01/20/2014
 SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY X DATE 285

Deal# 110086



VEHICLE/VESSEL TRANSFER AND REASSIGNMENT FORM

INSTRUCTIONS ON REVERSE SIDE — ALL SIGNATURES MUST BE IN INK — PHOTOCOPIES NOT ACCEPTED
 This form is not the ownership certificate. It must accompany the titling document or Application for Duplicate Title. For Car Buyer's Bill of Rights, visit www.dmv.ca.gov.

ACQUISITION NUMBER (DISMANTLER ONLY)

SECTION 1 — VEHICLE/VESSEL DESCRIPTION				
IDENTIFICATION NUMBER	YEAR MODEL	MAKE	LICENSE PLATE/CF NO.	MOTORCYCLE ENGINE NUMBER
WDDNG71X57A075860	2007 S550V	MERCEDES	5XCR849	

SECTION 2 — BILL OF SALE				
I/We <u>ELIDIA MUCIU</u> sell, transfer, and deliver the above vehicle/vessel				
to <u>MERCEDES BENZ OF BEVERLY HILLS</u>		on <u>12</u> <u>03</u> <u>20</u> <u>13</u>	for the amount of <u>\$</u> Value Rcv'd	
PRINT SELLER'S NAME(S)		MO DAY YEAR	(SELLING PRICE)	
PRINT BUYER'S NAME(S)				
If this was a gift, indicate relationship: _____ (e.g., parents, spouse, friend, etc.)				
			<u>\$</u> N/A	
(GIFT VALUE)				

SECTION 3 — ODOMETER DISCLOSURE STATEMENT (Void if Mileage is Altered or Erased)				
Federal and State Law requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.				
The odometer now reads <u>3</u> <u>6</u> <u>1</u> <u>5</u> <u>4</u> (no tenths) miles, and to the best of my knowledge reflects the ACTUAL mileage unless one of the following statements is checked.				
<input type="checkbox"/> Odometer reading is NOT the actual mileage <input type="checkbox"/> Mileage EXCEEDS the odometer mechanical limits				
Explain odometer discrepancy: _____				

SECTION 4 — BUYER AND SELLER (MUST hand print his or her name, date and sign this section.)				
BUYER'S SECTION				
I acknowledge the odometer reading and the facts of the transfer. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
PRINT BUYER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #	
<u>MERCEDES BENZ OF BEVERLY HILLS</u>	<u>X</u>	<u>12/03/13</u>	<u>61447</u>	
PRINT BUYER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #	
	<u>X</u>			
PRINT BUYER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #	
	<u>X</u>			
BUYER'S MAILING ADDRESS	CITY	STATE	ZIP CODE	DAYTIME TELEPHONE NO.
<u>9250 REVERLY BLVD</u>	<u>BEVERLY HILLS CA</u>		<u>90210</u>	<u>3106592980</u>
SELLER'S SECTION				
I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
PRINT SELLER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #	
<u>ELIDIA MUCIU</u>	<u>X</u>	<u>12/03/13</u>	<u>A5046947</u>	
PRINT SELLER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #	
	<u>X</u>	<u>12/03/13</u>		
PRINT SELLER'S NAME	SIGNATURE	DATE	DL/ID OR DEALER/DISM #	
	<u>X</u>			
SELLER'S MAILING ADDRESS	CITY	STATE	ZIP CODE	DAYTIME TELEPHONE NO.
<u>11478 ELDRIDGE AVE</u>	<u>LAKE VIEW TER CA</u>		<u>91342-7307</u>	<u>(818)834-3872</u>

SECTION 5 — POWER OF ATTORNEY				
I/We <u>ELIDIA MUCIU</u> appoint <u>MERCEDES BENZ OF BEVERLY H</u>				
PRINT NAME(S)		PRINT NAME(S)		
as my attorney in fact, to complete all necessary documents, as needed, to transfer ownership as required by law.				
SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY		DATE		
<u>X</u>		<u>12/03/13</u>		
SIGNATURE REQUIRED BY PERSON APPOINTING POWER OF ATTORNEY		DATE		
<u>X</u>				

EXHIBIT "B"

CERTIFICATE OF CUSTODIAN OF RECORDS

STATE OF MT)
COUNTY OF Missoula) ss:

Taylor Heggen, who after first being duly sworn, under the
(Print Full Name)
penalty of perjury, deposes and says:

2. That on the 22 day of June 2018, I was served with a Subpoena Duces Tecum in connection with the case entitled, *Baker Boyer National Bank v. James Patterson Foust, Jr.* Case No: A17-760779-F, calling for the production of certain records relating to the Subpoena Duces Tecum.

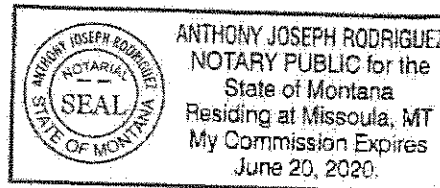
3. That I have examined the original of those records, and the accompanying records are true and exact copies of all the original records responsive to the Subpoena Duces Tecum which requires me to produce documents on or before the 19th day of June 2018, by 5:00 p.m. (PT).

4. The original of those records was made at or near the time of the acts, events, conditions or opinions recited therein by or from information transmitted by a person with knowledge in the course of a regularly conducted activity.

(Signature)

SUBSCRIBED AND SWORN to before me
this 22 day of June, 2018.

Anthony Joseph Rodriguez
Notary Public of and for said County and State





June 14, 2018

PRIVATE AND CONFIDENTIAL

Holland & Hart, LLP
9555 Hillwood Dr., Second Floor
Las Vegas, NV 89134

RE: James Foust
Your File No: A17760779F
Our Case No: 08-2018-01692

Dear Sir/Madam:

Santander Consumer USA Inc. ("SC"), is in receipt of a subpoena requesting information for the above-stated matter.

Enclosed please find the requested information for the File Number referenced above.

Please be advised that SC is a specialized consumer finance company engaged primarily in the purchasing, securitizing and servicing of auto loans and is not a bank. Therefore, our customer's(s') accounts do not have bank statements or copies of deposits and/or withdrawals. If further assistance is required, please contact us in writing via email to scusasubpoenateam@santanderconsumerusa.com.

Sincerely,

SC Subpoena Processing Department

**CURRENT CONTACT INFORMATION**

CUSTOMER NAME:	James Foust	
HOME ADDRESS:	8175 Arville St.	Las Vegas, NV 89139
TELEPHONE #:	(310) 490-4499	
EMAIL ADDRESS:	N/A	
EMPLOYER NAME:	Retired	
EMPLOYER PHONE #:	N/A	

CONFIDENTIAL

EXHIBIT "B"

CERTIFICATE OF CUSTODIAN OF RECORDS

STATE OF Texas)
COUNTY OF Dallas) ss:

Max Martinez, who after first being duly sworn, under the
(Print Full Name)
penalty of perjury, deposes and says:

2. That on the 13th day of June 2018, I was served with a Subpoena
Duces Tecum in connection with the case entitled, *Baker Boyer National Bank v. James
Patterson Foust, Jr.* Case No: A17-760779-F, calling for the production of certain records
relating to the Subpoena Duces Tecum.

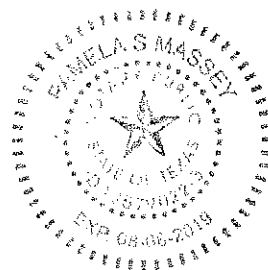
3. That I have examined the original of those records, and the accompanying
records are true and exact copies of all the original records responsive to the Subpoena Duces
Tecum which requires me to produce documents on or before the 19th day of June 2018, by
5:00 p.m. (PT).

4. The original of those records was made at or near the time of the acts, events,
conditions or opinions recited therein by or from information transmitted by a person with
knowledge in the course of a regularly conducted activity.

Max Martinez
(Signature) Max Martinez

SUBSCRIBED AND SWORN to before me
this 13th day of June, 2018.

Ronald S. Mores
Notary Public of and for said County and State



HOLLAND & HART LLP
9555 HILLWOOD DRIVE, 2ND FLOOR
LAS VEGAS, NEVADA 89134

[illegible]

18/29/82 17:08:54 Deutsche Financial-15413432481

TO:4

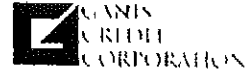
PAGE 005

Consumer Credit Application

IMPORTANT: Check (✓) the appropriate boxes below and complete the applicable sections.

NOTE: Applicant, if married, may apply for separate credit.

- ☐ INDIVIDUAL CREDIT - relying solely on my income or assets
- ☐ INDIVIDUAL CREDIT - relying on my income or assets as well as income or assets from other sources
- ☐ JOINT CREDIT - with spouse
- ☐ JOINT CREDIT - with _____, whose separate credit application is attached.



DEALER _____

PHONE _____

FAX _____

CONTACT _____

SECTION A. Information Regarding Individual Applicant:

LAST NAME (PRINT) FOUST	FIRST JAMES	INITIAL P	BIRTHDATE 5-9-40	SOCIAL SECURITY NO. [REDACTED]	NO OF DEPENDENTS 4	<input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED
ADDRESS 2272 TRAFALGAR			CITY HENDERSON	STATE WV	ZIP 8904	HOME PHONE 301-544-5706
PREVIOUS ADDRESS (TO COVER 5 YEARS RESIDENCE)			CITY	STATE	ZIP	HOW LONG? YRS. MOS.
POSITION	PRESENT EMPLOYER	ADDRESS	CITY	STATE	ZIP	PHONE YRS. MOS.
PREVIOUS EMPLOYMENT (TO COVER 5 YEAR HISTORY)			ADDRESS	CITY	STATE	ZIP
NEAREST RELATIVE NOT LIVING WITH APPLICANT			ADDRESS	CITY	STATE	ZIP

INCOME Applicant's gross monthly income from employment:

Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation

Amount of other monthly income and source(s):

Driver's License State _____ Number _____

TOTAL MONTHLY INCOME \$

SECTION B. Information Regarding Joint Applicant or Other Party: (Complete only if: for joint credit, for individual credit relying on income or assets from other sources)

LAST NAME (PRINT)	FIRST	INITIAL	BIRTHDATE	SOCIAL SECURITY NO.	NO OF DEPENDENTS	<input type="checkbox"/> MARRIED <input type="checkbox"/> UNMARRIED <input type="checkbox"/> SEPARATED
ADDRESS			CITY	STATE	ZIP	HOME PHONE
PREVIOUS ADDRESS (TO COVER 5 YEARS RESIDENCE)			CITY	STATE	ZIP	HOW LONG? YRS. MOS.
POSITION	PRESENT EMPLOYER	ADDRESS	CITY	STATE	ZIP	PHONE YRS. MOS.
PREVIOUS EMPLOYMENT (TO COVER 5 YEAR HISTORY)			ADDRESS	CITY	STATE	ZIP
NEAREST RELATIVE NOT LIVING WITH JOINT APPLICANT OR OTHER PARTY			ADDRESS	CITY	STATE	ZIP

INCOME Joint Applicant or Other Party's gross monthly income from employment:

Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation

Amount of other monthly income and source(s):

Driver's License State _____ Number _____

TOTAL MONTHLY INCOME \$

SECTION C. Asset and Debt Information: (If Section B has been completed, this Section should be completed giving information about both the Applicant and Joint Applicant or Other Party. Please mark Applicant-related information with an 'A'. If Section B was not completed, only give information about the Applicant in this Section.)

LANDLORD OR MORTGAGE HOLDER	MORTGAGE BALANCE	MONTHLY PAYMENT OR RENT	SECOND MORTGAGE BAL.	MONTHLY PAYMENT
OWN <input type="checkbox"/> RENT <input type="checkbox"/> CREDITOR	ADDRESS	CITY	STATE	ZIP
BALANCE		MONTHLY PAYMENT		
HAVE YOU EVER HAD ANY PROPERTY REPOSSESSED?		DO YOU HAVE ANY LAWSUITS PENDING AGAINST YOU?	HAVE YOU EVER FILED BANKRUPTCY?	MILITARY RESERVE?
YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
DEAL STRUCTURE		TO BE COMPLETED BY DEALER		UNIT FINANCED:
CASH SALE PRICE \$	OTHER \$	NEW OR USED	FUEL TYPE <input type="checkbox"/> GAS <input type="checkbox"/> DIESEL	
ACCESSORIES \$	CASH DOWN \$	MAKE	ENGINE TYPE <input type="checkbox"/> SINGLE <input type="checkbox"/> TWIN	
SALES TAX \$	TRADE-IN \$	MODEL	TRADE-IN:	
LICENSE \$	PAYOFF \$	YEAR	MAKE	
INSURANCE \$	TOTAL DOWN \$	ENGINE SIZE	MODEL	
SVC CONTRACT \$	TOTAL FINANCED \$	LENGTH	YEAR	
DOCS \$	TERM	MILEAGE	PROGRAM CODE	
		BODY TYPE		

Maine, New York, Rhode Island, and Vermont Residents: You authorize us to obtain consumer reports from consumer reporting agencies in considering this application and subsequently in connection with any update, renewal, extension of credit, review or collection of your account. At your request, you will be informed whether such a report was requested and, if so, the name and address of the agency that furnished the report. **Ohio Residents:** The Ohio Laws against discrimination require that all creditors make credit available to credit worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission administers compliance with this law. **Married Wisconsin Residents:** You acknowledge that any obligation incurred in connection with this application is incurred in the interest of your family or marriage. No provision of a marital property agreement, a unilateral statement under section 766.59 or a court decree under section 766.70 adversely affects the interest of the creditor unless the creditor, prior to the time credit is granted, is furnished a copy of the agreement, statement or decree or has actual knowledge of the adverse position when the obligation to the creditor is incurred.

Washington Residents: Please let us know if we should investigate your credit references and/or credit history under another name. Washington state law against discrimination prohibits discrimination in credit transactions because of race, creed, color, national origin, sex or marital status. **California Residents:** As required by law you are hereby notified that a negative credit report reflecting on your credit record may be submitted to a credit reporting agency if you fail to fulfill the terms of your credit obligations.

In submitting this Application to Gan's Credit Corporation ("GCC") seeking an extension of secured credit, the undersigned warrant and represent to GCC that the information furnished above is truthful, accurate, and supplied voluntarily. The undersigned authorize GCC to: 1) check their credit and employment histories and bank and personal references; 2) to obtain consumer reports from consumer reporting agencies in considering this Application and subsequently in connection with any update, renewal, extension of credit, review or collection of their account (if credit is granted); 3) to report to others their credit experience with GCC and to answer questions about their credit experience with GCC (in accordance with applicable law) and; 4) to keep this application whether or not it is approved. The undersigned agree to notify the creditor of any material change of the information provided above.

X
APPLICANT'S SIGNATURE _____ DATE **3/5/03**

X
JOINT APPLICANT'S SIGNATURE _____ DATE _____

GCC RV-Mar App revised 7/01/02

DATE

293

HLLC-SANTANDER 000006

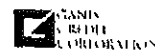
NOTE: Applicant, if married, may apply for separate credit

☐ **INDIVIDUAL CREDIT** - relying solely on my income or assets

☐ **INDIVIDUAL CREDIT** - relying on my income or assets as well as income or assets from other sources

☐ **JOINT CREDIT** - with spouse

☐ **JOINT CREDIT** - with _____, whose separate credit application is attached.



DEALER _____
PHONE _____
FAX _____
CONTACT _____

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[illegible]

Alimony, child support or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

[illegible][illegible]

of your credit obligations. If you are unable to provide accurate information, your credit report may be submitted to a credit reporting agency if you fail to fulfill all the terms of this agreement.

By submitting this Application to Capital Credit Corporation ("CCC"), I acknowledge and warrant that the undersigned warrant and represent to CCC that the information furnished herein is truthful, accurate, and supplied voluntarily. The undersigned authorizes CCC to: 1) check their credit and references to determine creditworthiness; 2) to obtain consumer reports from consumer reporting agencies in considering this Application and subsequently in connection with any approval, renewal, extension, or cancellation of credit; 3) to use the information furnished herein for any purpose for which CCC is licensed to use such information; and 4) to report to others their credit experience with CCC and to undersigned agree to authorize the creditor to use any material portion of the information furnished herein.

APPLICANT'S SIGNATURE/ 3/5/03 DATE X JOINT APPLICANTS' SIGNATURE

CGS Reviewer Acknowledgment

DATE _____

JOINT APPLICANTS' SIGNATURES _____

DATE _____

Image

James P. Faust 10021 Woodstream Ct. Las Vegas NV 89135	Bank NO 6642-1523	CHECK 1969 DATE Nov 21, 2014 AMOUNT \$ ***\$2,049.84	1969
PAY TO THE ORDER OF SANTANDER CONSUMER PO BOX 660413 DALLAS, TX 75266-0413	Account # 6201286	Two Thousand Fourty-Nine and 84/100 Dollars	
James P. Faust			
⑈004969⑈ ⑈122235821⑈			

James P. Faust 10021 Woodstream Ct. Las Vegas NV 89135	Bank NO 6642-1523	CHECK 2844 DATE MAR 11, 2015 AMOUNT \$ ***\$2,049.84	2844
PAY TO THE ORDER OF SANTANDER CONSUMER PO BOX 660413 DALLAS, TX 75266-0413	Account # 6201286	Two Thousand Forty-Nine and 84/100 Dollars	
James P. Faust			
⑈002844⑈ ⑈122235821⑈			

James P. Faust 10021 Woodstream Ct. Las Vegas NV 89135	Bank NO 6642-1523	CHECK 3317 DATE MAR 21, 2016 AMOUNT \$ ***\$2,049.84	3317
PAY TO THE ORDER OF SANTANDER CONSUMER PO BOX 660413 DALLAS, TX 75266-0413	Account # 6201286	Two Thousand Forty-Nine and 84/100 Dollars	
James P. Faust			
⑈003317⑈ ⑈122235821⑈			

James P. Faust 8175 Annie St. # 172 Las Vegas NV 89139	Bank NO 6642-1523	CHECK 3368 DATE OCT 1, 2016 AMOUNT \$ ***\$2,049.84	3368
PAY TO THE ORDER OF SANTANDER CONSUMER PO BOX 660413 DALLAS, TX 75266-0413	Account # 6201286	Two Thousand Forty-Nine and 84/100 Dollars	
James P. Faust			
⑈003368⑈ ⑈122235821⑈			

James P. Faust 8175 Annie St. # 172 Las Vegas NV 89139	Bank NO 6642-1523	CHECK 4096 DATE JUN 11, 2017 AMOUNT \$ ***\$2,049.84	4096
PAY TO THE ORDER OF SANTANDER CONSUMER PO BOX 660413 DALLAS, TX 75266-0413	Account # 6201286	Two Thousand Forty-Nine and 84/100 Dollars	
James P. Faust			
⑈004096⑈ ⑈122235821⑈			

James P. Faust 8175 Annie St. # 172 Las Vegas NV 89139	Bank NO 6642-1523	CHECK 6181 DATE Feb 1, 2019 AMOUNT \$ ***\$2,049.84	6181
PAY TO THE ORDER OF SANTANDER CONSUMER PO BOX 660413 DALLAS, TX 75266-0413	Account # 6201286	Two Thousand Forty-Nine and 84/100 Dollars	
James P. Faust			
⑈006181⑈ ⑈122235821⑈			



P.O. Box 961245
Fort Worth, TX 76161-1245

Date: June 05, 2018
To: JAMES FOUST
Fax:
From: Santander Consumer USA Inc.

Comments:

000831

000831

This is an attempt to collect a debt and any information obtained will be used for that purpose. This communication is from a debt collector.

NOTICE TO CALIFORNIA RESIDENTS: You are hereby notified that a negative credit report reflecting on your credit record may be submitted to a credit reporting agency if you fail to fulfill the terms of your credit obligation.

NOTICE TO MAINE RESIDENTS: Hours of operation: 7 a.m. to 9 p.m. Central Time, Monday through Friday. Our toll free telephone number is 1.888.222.4227.

NOTICE TO MASSACHUSETTS RESIDENTS: Hours of operation: 7 a.m. to 9 p.m. Central Time, Monday through Friday. Our toll free telephone number is 1.888.222.4227.

Notice of Important Rights: You have the right to make a written or oral request that telephone calls regarding your debt not be made to you at your place of employment. Any such oral request will be valid for only ten (10) days unless you provide written confirmation of the request postmarked or delivered within seven (7) days of such request. You may terminate this request by writing to Santander Consumer USA.

NOTICE TO BUFFALO RESIDENTS: This collection agency is licensed by the City of Buffalo, New York License Number 556975.

NOTICE TO NEW YORK CITY RESIDENTS: This collection agency is licensed by the New York City Department of Consumer Affairs License Number 1343310.

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P.O. Box 961245
Fort Worth, TX 76161-1245

Account Number: 6201266

Primary Name: JAMES FOUST

Good Through	Total Payoff	Principal	Interest	Late Fees	Misc. Fees	
Jun 19, 2018	\$104,025.74	\$102,741.18	\$1,264.56	\$20.00	\$0.00	
Effective Date	Amount	Principal	Interest	Late Fees	Misc. Fees	Principal Balance
May 24, 2018	\$10.00	\$0.00	\$0.00	\$10.00	\$0.00	\$102,741.18
Late charge assessment System Generated Transaction						
Apr 06, 2018	\$-2,049.84	\$-1,536.45	\$-513.39	\$0.00	\$0.00	\$102,741.18
System allocated payment Lockbox Payment BTCH# 00001420 SEQ# 0011 CK# 000000						
Mar 07, 2018	\$-2,049.84	\$-1,511.65	\$-538.19	\$0.00	\$0.00	\$104,277.63
System allocated payment Lockbox Payment BTCH# 00001455 SEQ# 0028 CK# 000000						
Feb 04, 2018	\$-2,049.84	\$-1,679.47	\$-370.37	\$0.00	\$0.00	\$105,789.28
System allocated payment Lockbox Payment BTCH# 00001414 SEQ# 0005 CK# 000000						
Jan 14, 2018	\$-2,049.84	\$-1,406.61	\$-643.23	\$0.00	\$0.00	\$107,468.75
System allocated payment Lockbox Payment BTCH# 00001422 SEQ# 0028 CK# 000000						
Dec 09, 2017	\$-2,049.84	\$-1,470.36	\$-579.48	\$0.00	\$0.00	\$108,875.36
System allocated payment Lockbox Payment BTCH# 00001424 SEQ# 0001 CK# 000000						
Nov 07, 2017	\$-2,049.84	\$-1,718.80	\$-331.04	\$0.00	\$0.00	\$110,345.72
System allocated payment Lockbox Payment BTCH# 00001438 SEQ# 0001 CK# 000000						
Oct 20, 2017	\$-2,049.84	\$-1,287.16	\$-762.68	\$0.00	\$0.00	\$112,064.52
System allocated payment Lockbox Payment BTCH# 00001414 SEQ# 0003 CK# 000000						
Oct 04, 2017	\$2,049.84	\$1,584.79	\$465.05	\$0.00	\$0.00	\$113,351.68

Reversal of system allocated payment NSF						
Oct 04, 2017	\$-2,049.84	\$-1,584.79	\$-465.05	\$0.00	\$0.00	\$111,766.89
System allocated payment Lockbox Payment BTCH# 00001411 SEQ# 0001 CK# 000000						
Sep 09, 2017	\$-2,049.84	\$-1,409.50	\$-640.34	\$0.00	\$0.00	\$113,351.68
System allocated payment Lockbox Payment BTCH# 00001408 SEQ# 0001 CK# 000000						
Aug 06, 2017	\$-2,049.84	\$-1,496.55	\$-553.29	\$0.00	\$0.00	\$114,761.18
System allocated payment Lockbox Payment BTCH# 00001417 SEQ# 0017 CK# 000000						
Jul 08, 2017	\$-2,049.84	\$-1,393.38	\$-656.46	\$0.00	\$0.00	\$116,257.73
System allocated payment Lockbox Payment BTCH# 00001429 SEQ# 0024 CK# 000000						
Jun 04, 2017	\$-2,049.84	\$-1,502.32	\$-547.52	\$0.00	\$0.00	\$117,651.11
System allocated payment Lockbox Payment BTCH# 00001417 SEQ# 0037 CK# 000000						
May 07, 2017	\$-2,049.84	\$-1,456.05	\$-593.79	\$0.00	\$0.00	\$119,153.43
System allocated payment Lockbox Payment BTCH# 00001434 SEQ# 0002 CK# 000000						
Apr 07, 2017	\$-2,049.84	\$-2,009.59	\$-40.25	\$0.00	\$0.00	\$120,609.48
System allocated payment Lockbox Payment BTCH# 00001423 SEQ# 0011 CK# 000000						
Apr 05, 2017	\$-2,038.89	\$-963.99	\$-1,074.90	\$0.00	\$0.00	\$122,619.07
System allocated payment Drive Collector - Visa (no fee)						
Mar 24, 2017	\$10.00	\$0.00	\$0.00	\$10.00	\$0.00	\$123,583.06
Late charge assessment System Generated Transaction						
Mar 13, 2017	\$2,049.84	\$1,441.41	\$608.43	\$0.00	\$0.00	\$123,583.06
Reversal of system allocated payment NSF						
Mar 13, 2017	\$-2,049.84	\$-1,441.41	\$-608.43	\$0.00	\$0.00	\$122,141.65
System allocated payment Lockbox Payment BTCH# 00001474 SEQ# 0009 CK# 000000						
Feb 11, 2017	\$-2,049.84	\$-1,291.59	\$-758.25	\$0.00	\$0.00	\$123,583.06
System allocated payment Lockbox Payment						

BTCH# 00001434 SEQ# 0002 CK# 000000						
Jan 05, 2017	\$-2,049.84	\$-1,388.36	\$-661.48	\$0.00	\$0.00	\$124,874.65
System allocated payment Lockbox Payment BTCH# 00001477 SEQ# 0008 CK# 000000						
Dec 04, 2016	\$-2,049.84	\$-1,485.34	\$-564.50	\$0.00	\$0.00	\$126,263.01
System allocated payment Lockbox Payment BTCH# 00001467 SEQ# 0003 CK# 000000						
Nov 07, 2016	\$-2,049.84	\$-1,415.66	\$-634.18	\$0.00	\$0.00	\$127,748.35
System allocated payment Lockbox Payment BTCH# 00001473 SEQ# 0026 CK# 000000						
Oct 08, 2016	\$-2,049.84	\$-1,344.99	\$-704.85	\$0.00	\$0.00	\$129,164.01
System allocated payment Lockbox Payment BTCH# 00001438 SEQ# 0005 CK# 000000						
Sep 05, 2016	\$-2,049.84	\$-1,402.17	\$-647.67	\$0.00	\$0.00	\$130,509.00
System allocated payment Lockbox Payment BTCH# 00001505 SEQ# 0005 CK# 000000						
Aug 06, 2016	\$-2,049.84	\$-1,417.05	\$-632.79	\$0.00	\$0.00	\$131,911.17
System allocated payment Lockbox Payment BTCH# 00001469 SEQ# 0017 CK# 000000						
Jul 08, 2016	\$-2,049.84	\$-1,300.70	\$-749.14	\$0.00	\$0.00	\$133,328.22
System allocated payment Lockbox Payment BTCH# 00001409 SEQ# 0003 CK# 000000						
Jun 04, 2016	\$-2,049.84	\$-1,382.04	\$-667.80	\$0.00	\$0.00	\$134,628.92
System allocated payment Lockbox Payment BTCH# 00001448 SEQ# 0003 CK# 000000						
May 05, 2016	\$-2,049.84	\$-1,442.46	\$-607.38	\$0.00	\$0.00	\$136,010.96
System allocated payment Lockbox Payment BTCH# 00001421 SEQ# 0001 CK# 000000						
Apr 08, 2016	\$-2,049.84	\$-1,345.64	\$-704.20	\$0.00	\$0.00	\$137,453.42
System allocated payment Lockbox Payment BTCH# 00001449 SEQ# 0002 CK# 000000						
Mar 08, 2016	\$-2,049.84	\$-1,316.04	\$-733.80	\$0.00	\$0.00	\$138,799.06
System allocated payment Lockbox Payment BTCH# 00001482 SEQ# 0004 CK# 000000						
Feb 05, 2016	\$-2,049.84	\$-1,401.34	\$-648.50	\$0.00	\$0.00	\$140,115.10

Lockbox Payment BTCH# 00001463 SEQ# 0002 CK# 000000						
Jan 08, 2016	\$-2,049.84	\$-1,207.08	\$-842.76	\$0.00	\$0.00	\$141,516.44
System allocated payment Lockbox Payment BTCH# 00001407 SEQ# 0046 CK# 000000						
Dec 03, 2015	\$-2,049.84	\$-1,387.64	\$-662.20	\$0.00	\$0.00	\$142,723.52
System allocated payment Lockbox Payment BTCH# 00001475 SEQ# 0001 CK# 000000						
Nov 05, 2015	\$-2,049.84	\$-1,310.02	\$-739.82	\$0.00	\$0.00	\$144,111.16
System allocated payment Lockbox Payment BTCH# 00001450 SEQ# 0001 CK# 000000						
Oct 05, 2015	\$-2,049.84	\$-1,375.30	\$-674.54	\$0.00	\$0.00	\$145,421.18
System allocated payment Lockbox Payment BTCH# 00001441 SEQ# 0001 CK# 000000						
Sep 07, 2015	\$-2,049.84	\$-1,369.01	\$-680.83	\$0.00	\$0.00	\$146,796.48
System allocated payment Lockbox Payment BTCH# 00001402 SEQ# 0077 CK# 000000						
Aug 10, 2015	\$-2,049.84	\$-1,167.59	\$-882.25	\$0.00	\$0.00	\$148,165.49
System allocated payment Lockbox Payment BTCH# 00001447 SEQ# 0022 CK# 000000						
Jul 05, 2015	\$-2,049.84	\$-1,382.03	\$-667.81	\$0.00	\$0.00	\$149,333.08
System allocated payment Lockbox Payment BTCH# 00001440 SEQ# 0012 CK# 000000						
Jun 08, 2015	\$-2,049.84	\$-1,226.98	\$-822.86	\$0.00	\$0.00	\$150,715.11
System allocated payment Lockbox Payment BTCH# 00001420 SEQ# 0002 CK# 000000						
May 06, 2015	\$-2,049.84	\$-1,270.39	\$-779.45	\$0.00	\$0.00	\$151,942.09
System allocated payment Lockbox Payment BTCH# 00001400 SEQ# 0001 CK# 000000						
Apr 05, 2015	\$-2,049.84	\$-1,314.42	\$-735.42	\$0.00	\$0.00	\$153,212.48
System allocated payment Lockbox Payment BTCH# 00001419 SEQ# 0004 CK# 000000						
Mar 07, 2015	\$-2,049.84	\$-1,308.19	\$-741.65	\$0.00	\$0.00	\$154,526.90
System allocated payment Lockbox Payment BTCH# 00001909 SEQ# 0002 CK# 000000						

Feb 06, 2015	\$-2,049.84	\$-1,302.00	\$-747.84	\$0.00	\$0.00	\$155,835.09
System allocated payment Lockbox Payment BTCH# 00001443 SEQ# 0022 CK# 000000						
Jan 08, 2015	\$-2,049.84	\$-1,244.09	\$-805.75	\$0.00	\$0.00	\$157,137.09
System allocated payment Lockbox Payment BTCH# 00001414 SEQ# 0014 CK# 000000						
Dec 08, 2014	\$-2,049.84	\$-1,211.73	\$-838.11	\$0.00	\$0.00	\$158,381.18
System allocated payment Lockbox Payment BTCH# 00001413 SEQ# 0004 CK# 000000						
Nov 06, 2014	\$-2,049.84	\$-1,179.16	\$-870.68	\$0.00	\$0.00	\$159,592.91
System allocated payment Lockbox Payment BTCH# 00001427 SEQ# 0007 CK# 000000						
Oct 04, 2014	\$-2,049.84	\$-1,278.62	\$-771.22	\$0.00	\$0.00	\$160,772.07
System allocated payment Lockbox Payment BTCH# 00001441 SEQ# 0032 CK# 000000						
Sep 05, 2014	\$-2,049.84	\$-767.28	\$-1,282.56	\$0.00	\$0.00	\$162,050.69
System allocated payment Lockbox Payment BTCH# 00001424 SEQ# 0016 CK# 000000						
Jul 19, 2014	\$-2,049.84	\$-1,618.07	\$-431.77	\$0.00	\$0.00	\$162,817.97
System allocated payment Lockbox Payment BTCH# 00001433 SEQ# 0015 CK# 000000						
Jul 03, 2014	\$-2,049.84	\$-1,288.32	\$-761.52	\$0.00	\$0.00	\$164,436.04
System allocated payment Lockbox Payment BTCH# 00001904 SEQ# 0001 CK# 000000						
Jun 05, 2014	\$-2,049.84	\$-1,309.72	\$-740.12	\$0.00	\$0.00	\$165,724.36
System allocated payment Lockbox Payment BTCH# 00001440 SEQ# 0001 CK# 000000						
May 09, 2014	\$-2,049.84	\$-1,166.54	\$-883.30	\$0.00	\$0.00	\$167,034.08
System allocated payment Lockbox Payment BTCH# 00001908 SEQ# 0002 CK# 000000						
Apr 07, 2014	\$-2,049.84	\$-1,215.75	\$-834.09	\$0.00	\$0.00	\$168,200.62
System allocated payment Lockbox Payment BTCH# 00001903 SEQ# 0003 CK# 000000						
Mar 08, 2014	\$-2,049.84	\$-1,209.80	\$-840.04	\$0.00	\$0.00	\$169,416.37
System allocated payment						

Lockbox Payment

BTCH# 00001466 SEQ# 0006 CK# 000000

Feb 06, 2014	\$-2,049.84	\$-1,260.01	\$-789.83	\$0.00	\$0.00	\$170,626.17
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System allocated payment

Lockbox Payment

BTCH# 00001904 SEQ# 0001 CK# 000000

Jan 09, 2014	\$-2,049.84	\$-1,084.71	\$-965.13	\$0.00	\$0.00	\$171,886.18
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System allocated payment

Lockbox Payment

BTCH# 00001428 SEQ# 0002 CK# 000000

Dec 06, 2013	\$-2,049.84	\$-1,163.95	\$-885.89	\$0.00	\$0.00	\$172,970.89
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System allocated payment

Lockbox Payment

BTCH# 00001906 SEQ# 0005 CK# 000000

Nov 05, 2013	\$-2,049.84	\$-1,158.05	\$-891.79	\$0.00	\$0.00	\$174,134.84
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System allocated payment

Lockbox Payment

BTCH# 00001403 SEQ# 0002 CK# 000000

Oct 05, 2013	\$-2,049.84	\$-1,238.67	\$-811.17	\$0.00	\$0.00	\$175,292.89
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System allocated payment

Lockbox Payment

BTCH# 00001449 SEQ# 0002 CK# 000000

Sep 07, 2013	\$-2,049.84	\$-1,029.95	\$-1,019.89	\$0.00	\$0.00	\$176,531.56
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System allocated payment

Lockbox Payment

BTCH# 00001902 SEQ# 0001 CK# 000000

Aug 03, 2013	\$-2,049.84	\$-1,218.34	\$-821.50	\$0.00	\$-10.00	\$177,561.51
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System allocated payment

Lockbox Payment

BTCH# 00001440 SEQ# 0009 CK# 000000

Jul 06, 2013	\$-2,049.84	\$-1,134.54	\$-915.30	\$0.00	\$0.00	\$178,779.85
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System allocated payment

Lockbox Payment

BTCH# 00001458 SEQ# 0047 CK# 000000

Jun 05, 2013	\$-2,049.84	\$-1,128.80	\$-921.04	\$0.00	\$0.00	\$179,914.39
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System allocated payment

Lockbox Payment

BTCH# 00001431 SEQ# 0033 CK# 000000

May 05, 2013	\$-2,109.84	\$-1,212.55	\$-897.29	\$0.00	\$0.00	\$181,043.19
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System allocated payment

Lockbox Payment

BTCH# 00001433 SEQ# 0014 CK# 000000

Apr 05, 2013	\$-2,039.84	\$-1,166.89	\$-872.95	\$0.00	\$0.00	\$182,255.74
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System allocated payment

Lockbox Payment

BTCH# 00001436 SEQ# 0009 CK# 000000

Mar 07, 2013						
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	\$-2,039.84	\$-1,191.53	\$-848.31	\$0.00	\$0.00	\$183,422.63
System allocated payment Lockbox Payment BTCH# 00001915 SEQ# 0001 CK# 000000						
Feb 07, 2013	\$-2,039.84	\$-1,125.39	\$-914.45	\$0.00	\$0.00	\$184,614.16
System allocated payment Lockbox Payment BTCH# 00001422 SEQ# 0051 CK# 000000						
Jan 08, 2013	\$-2,039.84	\$-1,030.54	\$-1,009.30	\$0.00	\$0.00	\$185,739.55
System allocated payment Lockbox Payment BTCH# 00001461 SEQ# 0047 CK# 000000						
Dec 06, 2012	\$-2,039.84	\$-1,117.35	\$-922.49	\$0.00	\$0.00	\$186,770.09
System allocated payment Lockbox Payment BTCH# 00001504 SEQ# 0060 CK# 000000						
Nov 06, 2012	\$-2,039.84	\$-1,050.34	\$-989.50	\$0.00	\$0.00	\$187,887.44
System allocated payment Lockbox Payment BTCH# 00001408 SEQ# 0008 CK# 000000						
Oct 05, 2012	\$-2,049.84	\$-1,178.63	\$-871.21	\$0.00	\$0.00	\$188,937.78
System allocated payment Lockbox Payment BTCH# 00001480 SEQ# 0006 CK# 000000						
Sep 07, 2012	\$-2,079.84	\$-1,109.65	\$-970.19	\$0.00	\$0.00	\$190,116.41
System allocated payment Lockbox Payment BTCH# 00001411 SEQ# 0012 CK# 000000						
Aug 07, 2012	\$-2,039.84	\$-1,032.95	\$-1,006.89	\$0.00	\$0.00	\$191,226.06
System allocated payment Lockbox Payment BTCH# 00001432 SEQ# 0004 CK# 000000						
Jul 06, 2012	\$-2,039.84	\$-1,122.02	\$-917.82	\$0.00	\$0.00	\$192,259.01
System allocated payment Lockbox Payment BTCH# 00001470 SEQ# 0003 CK# 000000						
Jun 07, 2012	\$-2,039.84	\$-958.44	\$-1,081.40	\$0.00	\$0.00	\$193,381.03
System allocated payment Lockbox Payment BTCH# 00001475 SEQ# 0008 CK# 000000						
May 04, 2012	\$-2,039.84	\$-1,239.63	\$-800.21	\$0.00	\$0.00	\$194,339.47
System allocated payment Lockbox Payment BTCH# 00001402 SEQ# 0001 CK# 000000						
Apr 09, 2012	\$-2,059.84	\$-1,030.16	\$-1,029.68	\$0.00	\$0.00	\$195,579.10
System allocated payment						

Lockbox Payment BTCH# 00001424 SEQ# 0039 CK# 000000						
Mar 08, 2012	\$-2,039.84	\$-1,004.91	\$-1,034.93	\$0.00	\$0.00	\$196,609.26
System allocated payment Lockbox Payment BTCH# 00001441 SEQ# 0034 CK# 000000						
Feb 05, 2012	\$-2,059.84	\$-1,278.61	\$-781.23	\$0.00	\$0.00	\$197,614.17
System allocated payment Lockbox Payment BTCH# 00001412 SEQ# 0061 CK# 000000						
Jan 12, 2012	\$-2,059.84	\$-782.85	\$-1,276.99	\$0.00	\$0.00	\$198,892.78
System allocated payment Lockbox Payment						
Jan 12, 2012	\$-10.00	\$0.00	\$0.00	\$-10.00	\$0.00	\$199,675.63
Waive late charge fee Lockbox Payment						
Jan 15, 2012	\$10.00	\$0.00	\$0.00	\$10.00	\$0.00	\$199,675.63
Late charge assessment System Generated Transaction						
Dec 04, 2011	\$-2,049.84	\$-1,094.34	\$-955.50	\$0.00	\$0.00	\$199,675.63
System allocated payment Lockbox Payment BTCH# 00001404 SEQ# 0004 CK# 000000						
Nov 05, 2011	\$-2,049.84	\$-1,155.12	\$-894.72	\$0.00	\$0.00	\$200,769.97
System allocated payment Lockbox Payment						
Oct 09, 2011	\$-2,049.84	\$-1,083.68	\$-966.16	\$0.00	\$0.00	\$201,925.09
System allocated payment Lockbox Payment						
Sep 10, 2011	\$-2,049.84	\$-845.48	\$-1,204.36	\$0.00	\$0.00	\$203,008.77
System allocated payment Lockbox Payment						
Aug 05, 2011	\$-2,049.84	\$-1,108.02	\$-941.82	\$0.00	\$0.00	\$203,854.25
System allocated payment Lockbox Payment						
Jul 08, 2011	\$-2,049.84	\$-901.18	\$-1,148.66	\$0.00	\$0.00	\$204,962.27
System allocated payment Lockbox Payment						
Jun 04, 2011	\$-2,049.84	\$-1,166.48	\$-883.36	\$0.00	\$0.00	\$205,863.45
System allocated payment Lockbox Payment BTCH# 00001457 SEQ# 0001 CK# 000000						
May 09, 2011	\$-2,049.84	\$-1,061.21	\$-988.63	\$0.00	\$0.00	\$207,029.93
System allocated payment Lockbox GE						

	\$-4,099.68	\$0.00	\$-4,099.68	\$0.00	\$0.00	\$208,091.14
System allocated payment Lockbox GE						
Mar 14, 2011	\$10.00	\$0.00	\$0.00	\$10.00	\$0.00	\$208,091.14
Late charge assessment Late Fee						
Dec 11, 2010	\$-2,049.84	\$-986.18	\$-1,063.66	\$0.00	\$0.00	\$208,091.14
System allocated payment Converted Regular Payment						
Nov 10, 2010	\$-2,049.84	\$-809.84	\$-1,240.00	\$0.00	\$0.00	\$209,077.32
System allocated payment Converted Regular Payment						
Oct 05, 2010	\$-2,049.84	\$-1,183.87	\$-865.97	\$0.00	\$0.00	\$209,887.16
System allocated payment Converted Regular Payment						
Sep 10, 2010	\$-2,049.84	\$-798.13	\$-1,251.71	\$0.00	\$0.00	\$211,071.03
System allocated payment Converted Regular Payment						
Aug 05, 2010	\$-2,049.84	\$-1,036.58	\$-1,013.26	\$0.00	\$0.00	\$211,869.16
System allocated payment Converted Regular Payment						
Jul 07, 2010	\$-2,049.84	\$-1,066.63	\$-983.21	\$0.00	\$0.00	\$212,905.74
System allocated payment Converted Regular Payment						
Jun 09, 2010	\$-2,049.84	\$-1,237.52	\$-812.32	\$0.00	\$0.00	\$213,972.37
System allocated payment Converted Regular Payment						
May 17, 2010	\$-2,049.84	\$-809.07	\$-1,240.77	\$0.00	\$0.00	\$215,209.89
System allocated payment Converted Regular Payment						
Apr 12, 2010	\$-2,049.84	\$-804.44	\$-1,245.40	\$0.00	\$0.00	\$216,018.96
System allocated payment Converted Regular Payment						
Mar 08, 2010	\$-2,049.84	\$-1,119.91	\$-929.93	\$0.00	\$0.00	\$216,823.40
System allocated payment Converted Regular Payment						
Feb 10, 2010	\$-2,049.84	\$-972.05	\$-1,077.79	\$0.00	\$0.00	\$217,943.31
System allocated payment Converted Regular Payment						
Jan 11, 2010	\$-2,049.84	\$-1,039.14	\$-1,010.70	\$0.00	\$0.00	\$218,915.36
System allocated payment Converted Regular Payment						
Dec 14, 2009	\$-2,049.84	\$-673.96	\$-1,375.88	\$0.00	\$0.00	\$219,954.50
System allocated payment						

Converted Regular Payment						
Nov 06, 2009	\$-2,049.84	\$-1,139.98	\$-909.86	\$0.00	\$0.00	\$220,628.46
System allocated payment Converted Regular Payment						
Oct 12, 2009	\$-2,049.84	\$-916.95	\$-1,132.89	\$0.00	\$0.00	\$221,768.44
System allocated payment Converted Regular Payment						
Sep 11, 2009	\$-2,049.84	\$-1,204.77	\$-845.07	\$0.00	\$0.00	\$222,685.39
System allocated payment Converted Regular Payment						
Aug 19, 2009	\$-2,049.84	\$-503.18	\$-1,546.66	\$0.00	\$0.00	\$223,890.16
System allocated payment Converted Regular Payment						
Jul 08, 2009	\$-2,049.84	\$-756.62	\$-1,293.22	\$0.00	\$0.00	\$224,393.34
System allocated payment Converted Regular Payment						
Jun 03, 2009	\$-2,049.84	\$-973.68	\$-1,076.16	\$0.00	\$0.00	\$225,149.96
System allocated payment Converted Regular Payment						
May 05, 2009	\$-2,049.84	\$-1,564.08	\$-485.76	\$0.00	\$0.00	\$226,123.64
System allocated payment Converted Regular Payment						
Apr 22, 2009	\$-2,049.84	\$-402.84	\$-1,647.00	\$0.00	\$0.00	\$227,687.72
System allocated payment Converted Regular Payment						
Mar 09, 2009	\$-2,049.84	\$-1,109.49	\$-940.35	\$0.00	\$0.00	\$228,090.56
System allocated payment Converted Regular Payment						
Feb 12, 2009	\$-2,049.84	\$-954.49	\$-1,095.35	\$0.00	\$0.00	\$229,200.05
System allocated payment Converted Regular Payment						
Jan 14, 2009	\$-2,049.84	\$-725.98	\$-1,323.86	\$0.00	\$0.00	\$230,154.54
System allocated payment Converted Regular Payment						
Dec 10, 2008	\$-2,049.84	\$-911.78	\$-1,138.06	\$0.00	\$0.00	\$230,880.52
System allocated payment Converted Regular Payment						
Nov 10, 2008	\$-2,049.84	\$-717.99	\$-1,331.85	\$0.00	\$0.00	\$231,792.30
System allocated payment Converted Regular Payment						
Oct 06, 2008	\$-2,049.84	\$-1,284.58	\$-765.26	\$0.00	\$0.00	\$232,510.29
System allocated payment Converted Regular Payment						
Sep 16, 2008	\$-2,049.84	\$-668.42	\$-1,381.42	\$0.00	\$0.00	\$233,794.87

Converted Regular Payment

Aug 11, 2008	\$-2,049.84	\$-817.64	\$-1,232.20	\$0.00	\$0.00	\$234,463.29
System allocated payment Converted Regular Payment						
Jul 10, 2008	\$-2,049.84	\$-967.23	\$-1,082.61	\$0.00	\$0.00	\$235,280.93
System allocated payment Converted Regular Payment						
Jun 12, 2008	\$-2,049.84	\$-692.61	\$-1,357.23	\$0.00	\$0.00	\$236,248.16
System allocated payment Converted Regular Payment						
May 08, 2008	\$-2,049.84	\$-1,231.27	\$-818.57	\$0.00	\$0.00	\$236,940.77
System allocated payment Converted Regular Payment						
Apr 17, 2008	\$-2,049.84	\$-720.53	\$-1,329.31	\$0.00	\$0.00	\$238,172.04
System allocated payment Converted Regular Payment						
Mar 14, 2008	\$-2,049.84	\$-1,146.28	\$-903.56	\$0.00	\$0.00	\$238,892.57
System allocated payment Converted Regular Payment						
Feb 20, 2008	\$-2,049.84	\$-1,299.38	\$-750.46	\$0.00	\$0.00	\$240,038.85
System allocated payment Converted Regular Payment						
Feb 01, 2008	\$-2,049.84	\$-781.71	\$-1,268.13	\$0.00	\$0.00	\$241,338.23
System allocated payment Converted Regular Payment						
Dec 31, 2007	\$-2,049.84	\$-734.64	\$-1,315.20	\$0.00	\$0.00	\$242,119.94
System allocated payment Converted Regular Payment						
Nov 28, 2007	\$-2,049.84	\$-56.63	\$-1,993.21	\$0.00	\$0.00	\$242,854.58
System allocated payment Converted Regular Payment						
Oct 09, 2007	\$-2,049.84	\$-1,568.39	\$-481.45	\$0.00	\$0.00	\$242,911.21
System allocated payment Converted Regular Payment						
Sep 27, 2007	\$-2,049.84	\$-3.61	\$-2,046.23	\$0.00	\$0.00	\$244,479.60
System allocated payment Converted Regular Payment						
Aug 07, 2007	\$-2,049.84	\$-1,162.96	\$-886.88	\$0.00	\$0.00	\$244,483.21
System allocated payment Converted Regular Payment						
Jul 16, 2007	\$-2,049.84	\$-1,199.14	\$-850.70	\$0.00	\$0.00	\$245,646.17
System allocated payment Converted Regular Payment						

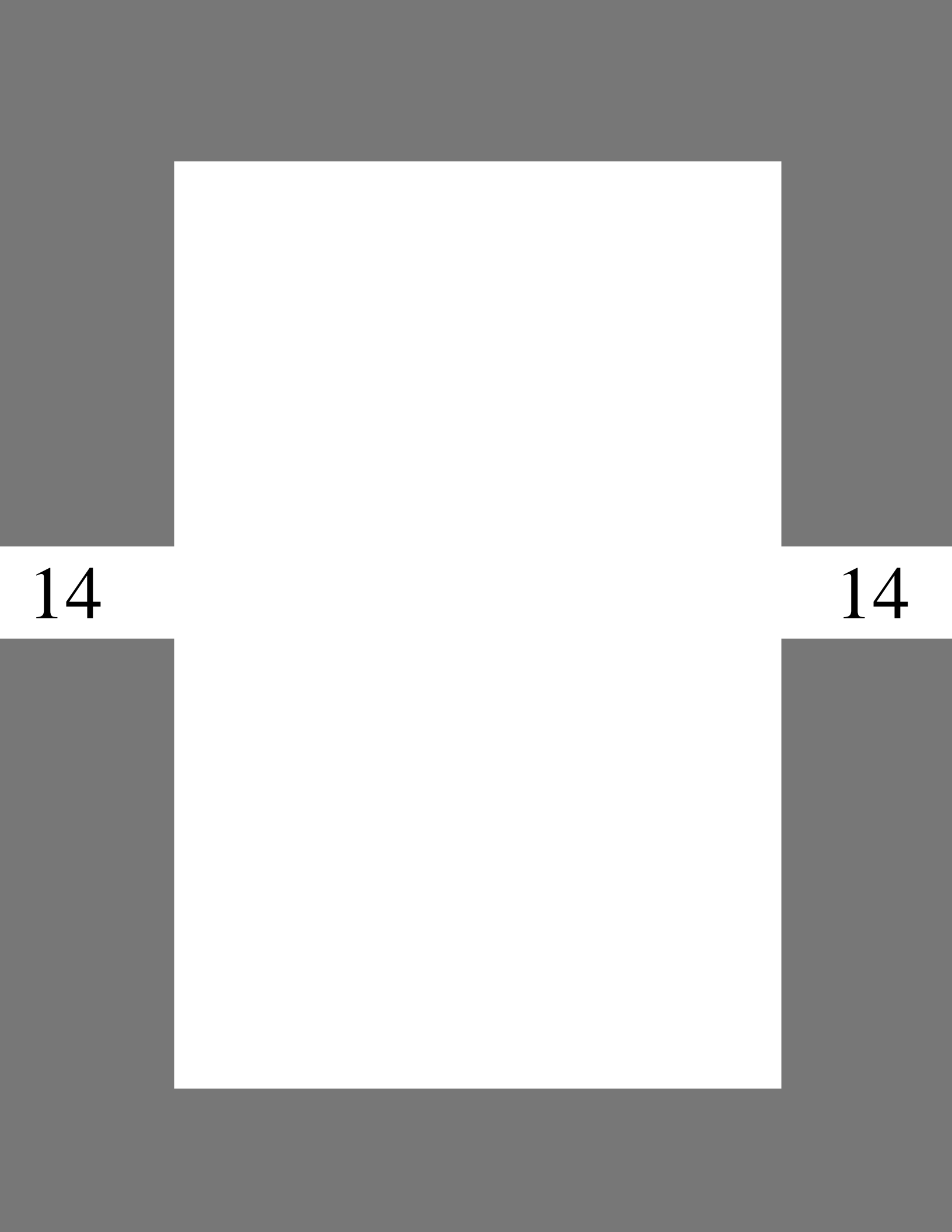
Jun 25, 2007	\$-2,049.84	\$-709.18	\$-1,340.66	\$0.00	\$0.00	\$246,845.31
System allocated payment Converted Regular Payment						
May 23, 2007	\$-2,049.84	\$-989.34	\$-1,060.50	\$0.00	\$0.00	\$247,554.49
System allocated payment Converted Regular Payment						
Apr 27, 2007	\$-2,049.84	\$-862.87	\$-1,186.97	\$0.00	\$0.00	\$248,543.83
System allocated payment Converted Regular Payment						
Mar 29, 2007	\$-2,049.84	\$-858.78	\$-1,191.06	\$0.00	\$0.00	\$249,406.70
System allocated payment Converted Regular Payment						
Feb 28, 2007	\$-2,049.84	\$-527.01	\$-1,522.83	\$0.00	\$0.00	\$250,265.48
System allocated payment Converted Regular Payment						
Jan 22, 2007	\$-2,049.84	\$-1,305.15	\$-744.69	\$0.00	\$0.00	\$250,792.49
System allocated payment Converted Regular Payment						
Jan 04, 2007	\$-2,049.84	\$-227.85	\$-1,821.99	\$0.00	\$0.00	\$252,097.64
System allocated payment Converted Regular Payment						
Nov 21, 2006	\$-2,049.84	\$-1,425.19	\$-624.65	\$0.00	\$0.00	\$252,325.49
System allocated payment Converted Regular Payment						
Nov 06, 2006	\$-2,049.84	\$-713.52	\$-1,336.32	\$0.00	\$0.00	\$253,750.68
System allocated payment Converted Regular Payment						
Oct 05, 2006	\$-2,049.84	\$-793.14	\$-1,256.70	\$0.00	\$0.00	\$254,464.20
System allocated payment Converted Regular Payment						
Sep 05, 2006	\$-2,049.84	\$-330.12	\$-1,719.72	\$0.00	\$0.00	\$255,257.34
System allocated payment Converted Regular Payment						
Jul 26, 2006	\$-2,049.84	\$-1,081.04	\$-968.80	\$0.00	\$0.00	\$255,587.46
System allocated payment Converted Regular Payment						
Jul 03, 2006	\$-2,049.84	\$-614.27	\$-1,435.57	\$0.00	\$0.00	\$256,668.50
System allocated payment Converted Regular Payment						
May 30, 2006	\$-2,049.84	\$-821.48	\$-1,228.36	\$0.00	\$0.00	\$257,282.77
System allocated payment Converted Regular Payment						
May 01, 2006	\$-2,049.84	\$-648.53	\$-1,401.31	\$0.00	\$0.00	\$258,104.25
System allocated payment						

Converted Regular Payment						
Mar 29, 2006	\$-2,049.84	\$-645.04	\$-1,404.80	\$0.00	\$0.00	\$258,752.78
System allocated payment Converted Regular Payment						
Feb 24, 2006	\$-2,049.84	\$-981.57	\$-1,068.27	\$0.00	\$0.00	\$259,397.82
System allocated payment Converted Regular Payment						
Jan 30, 2006	\$-2,049.84	\$-721.52	\$-1,328.32	\$0.00	\$0.00	\$260,379.39
System allocated payment Converted Regular Payment						
Dec 30, 2005	\$-2,049.84	\$-974.61	\$-1,075.23	\$0.00	\$0.00	\$261,100.91
System allocated payment Converted Regular Payment						
Dec 05, 2005	\$-2,049.84	\$-284.55	\$-1,765.29	\$0.00	\$0.00	\$262,075.52
System allocated payment Converted Regular Payment						
Oct 25, 2005	\$-2,049.84	\$-840.42	\$-1,209.42	\$0.00	\$0.00	\$262,360.07
System allocated payment Converted Regular Payment						
Sep 27, 2005	\$-2,049.84	\$-836.57	\$-1,213.27	\$0.00	\$0.00	\$263,200.49
System allocated payment Converted Regular Payment						
Aug 30, 2005	\$-2,049.84	\$-2,049.84	\$0.00	\$0.00	\$0.00	\$264,037.06
System allocated payment Converted Regular Payment						
Aug 30, 2005	\$-2,049.84	\$-518.50	\$-1,531.34	\$0.00	\$0.00	\$266,086.90
System allocated payment Converted Regular Payment						
Jul 26, 2005	\$-2,049.84	\$-777.32	\$-1,272.52	\$0.00	\$0.00	\$266,605.40
System allocated payment Converted Regular Payment						
Jun 27, 2005	\$-2,049.84	\$-642.30	\$-1,407.54	\$0.00	\$0.00	\$267,382.72
System allocated payment Converted Regular Payment						
May 26, 2005	\$-2,049.84	\$-770.60	\$-1,279.24	\$0.00	\$0.00	\$268,025.02
System allocated payment Converted Regular Payment						
Apr 27, 2005	\$-2,049.84	\$-855.03	\$-1,194.81	\$0.00	\$0.00	\$268,795.62
System allocated payment Converted Regular Payment						
Mar 31, 2005	\$-2,049.84	\$-454.07	\$-1,595.77	\$0.00	\$0.00	\$269,650.65
System allocated payment Converted Regular Payment						
Feb 23, 2005	\$-2,049.84	\$-760.75	\$-1,289.09	\$0.00	\$0.00	\$270,104.72

Converted Regular Payment						
Jan 25, 2005	\$-2,049.84	\$-846.26	\$-1,203.58	\$0.00	\$0.00	\$270,865.47
System allocated payment Converted Regular Payment						
Dec 29, 2004	\$-2,049.84	\$-490.62	\$-1,559.22	\$0.00	\$0.00	\$271,711.73
System allocated payment Converted Regular Payment						
Nov 24, 2004	\$-2,049.84	\$-843.30	\$-1,206.54	\$0.00	\$0.00	\$272,202.35
System allocated payment Converted Regular Payment						
Oct 28, 2004	\$-2,049.84	\$-750.35	\$-1,299.49	\$0.00	\$0.00	\$273,045.65
System allocated payment Converted Regular Payment						
Sep 29, 2004	\$-2,049.84	\$-746.81	\$-1,303.03	\$0.00	\$0.00	\$273,796.00
System allocated payment Converted Regular Payment						
Aug 31, 2004	\$-2,049.84	\$-788.14	\$-1,261.70	\$0.00	\$0.00	\$274,542.81
System allocated payment Converted Regular Payment						
Aug 03, 2004	\$-2,049.84	\$-829.52	\$-1,220.32	\$0.00	\$0.00	\$275,330.95
System allocated payment Converted Regular Payment						
Jul 07, 2004	\$-2,049.84	\$-780.76	\$-1,269.08	\$0.00	\$0.00	\$276,160.47
System allocated payment Converted Regular Payment						
Jun 09, 2004	\$-2,049.84	\$-505.99	\$-1,543.85	\$0.00	\$0.00	\$276,941.23
System allocated payment Converted Regular Payment						
May 06, 2004	\$-2,049.84	\$-638.97	\$-1,410.87	\$0.00	\$0.00	\$277,447.22
System allocated payment Converted Regular Payment						
Apr 05, 2004	\$-2,049.84	\$-590.36	\$-1,459.48	\$0.00	\$0.00	\$278,086.19
System allocated payment Converted Regular Payment						
Mar 04, 2004	\$-2,049.84	\$-533.53	\$-1,516.31	\$0.00	\$0.00	\$278,676.55
System allocated payment Converted Regular Payment						
Feb 03, 2004	\$-2,049.84	\$0.00	\$-2,049.84	\$0.00	\$0.00	\$279,210.08
System allocated payment Converted Regular Payment						
Dec 17, 2003	\$-2,049.84	\$-1,497.04	\$-552.80	\$0.00	\$0.00	\$279,210.08
System allocated payment Converted Regular Payment						

Dec 05, 2003	\$-2,049.84	\$-1,217.04	\$-832.80	\$0.00	\$0.00	\$280,707.12
System allocated payment Converted Regular Payment						
Dec 04, 2003	\$-10.00	\$0.00	\$0.00	\$-10.00	\$0.00	\$281,924.16
Waive late charge fee Late Fee						
Nov 17, 2003	\$-2,049.84	\$-428.06	\$-1,621.78	\$0.00	\$0.00	\$281,924.16
System allocated payment Converted Regular Payment						
Nov 14, 2003	\$10.00	\$0.00	\$0.00	\$10.00	\$0.00	\$282,352.22
Late charge assessment Late Fee						
Oct 13, 2003	\$-2,049.84	\$-67.42	\$-1,982.42	\$0.00	\$0.00	\$282,352.22
System allocated payment Converted Regular Payment						
Sep 05, 2003	\$-2,049.84	\$0.00	\$-2,049.84	\$0.00	\$0.00	\$282,419.64
System allocated payment Converted Regular Payment						
Jul 18, 2003	\$-2,049.84	\$-1,072.85	\$-976.99	\$0.00	\$0.00	\$282,419.64
System allocated payment Converted Regular Payment						
Jun 27, 2003	\$-2,049.84	\$-1,348.66	\$-701.18	\$0.00	\$0.00	\$283,492.49
System allocated payment Converted Regular Payment						
Jun 12, 2003	\$-2,049.84	\$-132.40	\$-1,917.44	\$0.00	\$0.00	\$284,841.15
System allocated payment Converted Regular Payment						
May 02, 2003	\$-2,049.84	\$-1,064.07	\$-985.77	\$0.00	\$0.00	\$284,973.55
System allocated payment Converted Regular Payment						
Apr 11, 2003	\$-2,049.84	\$-311.13	\$-1,738.71	\$0.00	\$0.00	\$286,037.62
System allocated payment Converted Regular Payment						

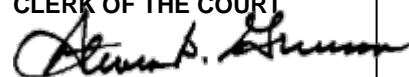
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Attorneys for Plaintiff Baker Boyer National Bank

**DISTRICT COURT
CLARK COUNTY, NEVADA**

BAKER BOYER NATIONAL BANK, a
Washington corporation,

Case No.: A-17-760779-F
Dept. No.: II

Plaintiff/Judgment Creditor,

**NOTICE OF ENTRY OF ORDER
GRANTING APPLICATION FOR
CHARGING ORDER AGAINST ALL
NEVADA LIMITED LIABILITY
COMPANY MEMBERSHIP
INTERESTS OF EDWARD N.
DETWILER AND DENYING
COUNTERMOTION**

vs.

JAMES PATTERSON FOUST, JR., also
known as James P. Foust, Jr., individually, and
his marital community, if any,

Defendant/Judgment Debtor.

PLEASE TAKE NOTICE that an Order Granting Application for Charging Order Against
All Nevada Limited Liability Company Membership Interests of Edward N. Detwiler and Denying
CounterMotion was entered on July 6, 2020. A copy of the Order is attached hereto.

Dated this 6th day of July, 2020.

LEWIS ROCA ROTHGERBER CHRISTIE LLP

By: /s/ John E. Bragonje

John E. Bragonje (SBN.: 9519)
3993 Howard Hughes Pkwy, Suite 600
Las Vegas, NV 89169-5996

Attorneys for Plaintiff Baker Boyer National Bank

CERTIFICATE OF SERVICE

Pursuant to Rule 5(b), I hereby certify that on this date, I electronically filed and served the foregoing document entitled “*Notice Of Entry Of Order Granting Application For Charging Order Against All Nevada Limited Liability Company Membership Interests Of Edward N. Detwiler And Denying Countermotion*” through the Court’s electronic filing system on all parties on the Court’s e-service list.

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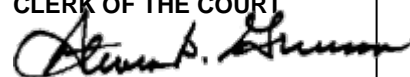
The Following Served via U.S. Mail:

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 Jared S. Heggen
 P.O. Box 16270
 Missoula, MT 59808

DATED this 6th day of July, 2020.

/s/ Rebecca J. Contla
 An employee of Lewis Roca
 Rothgerber Christie LLP


ORDR

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Attorneys for Plaintiff Baker Boyer National Bank

DISTRICT COURT**CLARK COUNTY, NEVADA**

BAKER BOYER NATIONAL BANK,

Case No.: A-17-760779-F

Plaintiff/Judgment Creditor,

Dept. No.: II

vs.

JAMES PATTERSON FOUST, JR., also
known as James P. Foust, Jr., individually, and
his marital community, if any,

**ORDER GRANTING APPLICATION
FOR CHARGING ORDER AGAINST
ALL NEVADA LIMITED LIABILITY
COMPANY MEMBERSHIP
INTERESTS OF EDWARD N.
DETWILER**

Defendant/Judgment Debtor.

AND

DENYING COUNTERMOTION

Date: June 22, 2020

Time: Chambers

ORDER

On May 15, 2020, Baker Boyer National Bank filed its Application for Charging Order Against All Nevada Limited Company Membership Interests of Edward N. Detwiler. On May 29, 2020, Edward Detwiler filed his Opposition to Application for Charging Order and Countermotion to Confirm Stay of Execution Based Upon COVID-19 Orders and Directives; the Bank filed its reply in support of and its opposition to these papers on June 15, 2020; and Mr. Detwiler filed his reply in support of his countermotion on June 17, 2020. The matter having been fully heard and submitted, the Court now grants the Bank's application for a charging order and denies Mr. Detwiler's countermotion for the following reasons.

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...

FINDINGS

1. For the reasons given in the Bank's papers, the Court finds that the Bank violated neither this Court's stay of execution imposed by its order of April 13, 2020, nor the pandemic-related emergency orders issued by the Governor and the Chief Judge of this Court.

2. This Court's stay order did not prohibit the filing of motions. The Bank did not procure a charging order before this Court's May 29, 2020 deadline; it merely filed an application. The charging order will ultimately issue more than one month after the applicable stay deadline.

3. Likewise, Declaration 17 prohibits only "executions of all funds . . . pursuant to NRS chapter 21" and "all writs of garnishment aiding in execution pursuant to NRS chapters 21 and 31" *See* Nevada Governor Steve Sisolak, Declaration of Emergency Directive 017, at §§ 1–2.)¹ Likewise, Administrative Order #20-09 applies only to "writs of execution or writs of garnishment."²

4. These directives, by their own explicit terms, do not apply to charging orders. A charging order arises out of NRS Chapter 86. A charging order provides "the exclusive remedy by which a judgment creditor of a member or an assignee of a member may satisfy a judgment out of the member's interest of the judgment debtor, whether the limited-liability company has one member or more than one member." NRS 86.401(2)(a). Therefore, the seeking and granting of a charging order violates no emergency order.

5. The Court rejects the argument that counsel for the Bank acted unethically by violating Nevada Rule of Professional Conduct 4.3. Mr. Detwiler has presented no persuasive or credible evidence that the Bank's counsel violated any rule of professional conduct.

6. The Court permits the removal of the designation "a Washington corporation" from the name of the Bank, as that reflects the true identity of the creditor, and the undisputed facts. The name of the Bank in the captions in this case are hereby amended to conform to the proof.

¹ Available at << [<< http://gov.nv.gov/News/Emergency_Orders/2020/2020-04-30_-_COVID-19_Declaration_of_Emergency_Directive_017_\(Attachments\)/](http://gov.nv.gov/News/Emergency_Orders/2020/2020-04-30_-_COVID-19_Declaration_of_Emergency_Directive_017_(Attachments)/) >> (last visited June 3, 2020).

² Eighth Judicial District Court, Clark County, Nevada, Administrative Order: 20-09, available at << https://eighthjdcourt.files.wordpress.com/2020/03/ao20_09.pdf >> (last visited June 3, 2020).


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