

United States Bankruptcy Court

BOISE DISTRICT OF IDAHO

PROOF OF CLAIM CHAPTER 13

In re (Name of Debtor) JAMES & MELISSA HERSHBERGER

Case Number 01 00317

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor (The person or entity to whom the debtor owes money or property) AmeriCredit Financial Services, Inc.

Check box if you are aware that anyone else has filed a proof of

Attach a copy of statement giving particulars. 1B7GL23Y6RW124500

Check box if you have never received any notices from the bankruptcy court in this case.

Check box if the address differs from the address on the envelope sent to you by the court.

Name and Addresses Where Notice Should be Sent

AmeriCredit Financial Services, Inc. 1100 W. GROVE PKWY STE. 101 TEMPE, AZ 85283

Telephone No. (800)392-1495

U.S. COURTS 2001 MAR -21 P 12:11 REC'D FILED CAMERON S. BURKE, CLERK, IDAHO

This Space is for Court Use Only

ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR

404724221

Check here if this claim replaces or amends a previously filed claim dated:

1. BASIS FOR CLAIM

- Goods sold
Services performed
Money loaned
Personal injury/wrongful death
Taxes
Other (Describe briefly) 1995 SUBARU IMPREZA

- Retiree benefits as defined in 11 U.S.C. § 1114(a)
Wages, salaries, and compensation (Fill out below)

Your social security number
Unpaid compensation for services performed from to (date) (date)

VIN# JF1GC655XSH510167

2. DATE DEBT WAS INCURRED

4/17/1999

3. IF COURT JUDGMENT, DATE OBTAINED:

4. CLASSIFICATION OF CLAIM.

Under the Bankruptcy Code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED.

SECURED CLAIM \$ 8,492.50 APR % 20.95

Attach evidence of perfection of security interest.

Brief Description of Collateral:

Real Estate Motor vehicle Other (Describe briefly)

Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ 852.41

UNSECURED NONPRIORITY CLAIM \$ 1,734.07

A claim is unsecured if there is no collateral or lien on property securing the claim or to the extent that the value of such property is less than the amount of the claim.

Specify the priority of the claim.

- Wages, salaries, or commissions (up to \$4000), earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier, 11 U.S.C. § 507(a)(3).
Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).
*Up to \$1,800 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).
Alimony, maintenance, or support owed to a spouse, former spouse or child - 11 U.S.C. § 507(a)(7)
Taxes or penalties of governmental units - 11 U.S.C. § 507(a)(8).
Other - Specify applicable paragraph of 11 U.S.C. § 507 (

*Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment

5. TOTAL AMOUNT OF CLAIM AT THE TIME CASE FILED:

\$ 1,734.07 (Unsecured) \$ 8,492.50 (Secured) \$ 0.00 (Priority) \$ 10,226.57 (Total)

Check this box if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.

6. CREDITS AND SET OFFS:

The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.

7. SUPPORTING DOCUMENTS:

Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach a summary.

8. TIME-STAMPED COPY:

To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

DATE

2/21/2001

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any).

T. Muniz TERRI MUNIZ, BANKRUPTCY MANAGER

THIS SPACE IS FOR COURT USE ONLY

Penalty for presenting fraudulent claim:

Fine of up to \$500,000 or imprisonment for up to 5 yrs., or both. 18 U.S.C. §§ 152 and 3571.

Handwritten mark resembling the number 2



Washington Installment Purchase Agreement - Motor Vehicle (Non-Residential)

This is a Fixed Rate Contract unless otherwise indicated. Market Rate. In this agreement the words I, me, and my mean each buyer who signs below. The words you and your mean the seller named on the bottom who is the creditor making the disclosures. This agreement covers my installment purchase of you of the vehicle described below. If I am one of two or more Buyers signing this Contract, I agree we will all be responsible to perform its terms. I also agree you may enforce it against any one of more of us. You have my permission to transfer this agreement, if applicable, to Bank of America NT&SA, doing business as Seafirst Bank, P.O. Box 3828, Seattle, Washington 98124 in which case the words you and your will mean Seafirst Bank. I'll then make my payments directly to the bank at the location designated.

Vehicle information table with columns: MODEL YEAR, MAKE OF CAR, BODY TYPE, IDENTIFICATION NO., STATE LICENSE NO., NEW OR USED, NO. OF CYLES, PRICE OF VEHICLE, MILEAGE. Includes details for a 1995 Subaru Impreza.

PROPERTY INSURANCE IS REQUIRED. I UNDERSTAND I CAN OBTAIN ANY INSURANCE RELATED TO THIS LOAN FROM MY OWN INSURANCE COMPANY OR AGENT OR I MAY BE ABLE TO OBTAIN INSURANCE THROUGH YOU. BODILY INJURY LIABILITY, PUBLIC LIABILITY, AND PROPERTY DAMAGE LIABILITY INSURANCE IS NOT INCLUDED IN ANY INSURANCE YOU OBTAIN FOR THE VEHICLE SPECIFICALLY MENTIONED. CREDIT LIFE, CREDIT DISABILITY, AND GUARANTEED AUTO PROTECTION (GAP) INSURANCE IS NOT REQUIRED TO OBTAIN CREDIT. I CAN OBTAIN THIS INSURANCE THROUGH YOU IF I WANT.

Insurance selection table with columns: COVERAGE, AMOUNT, PREMIUM, DEDUCTIBLE. Options include Comprehensive, Collision, Credit Life, Credit Disability, Joint Credit Life, and Joint Cr. Life and single cr. disability ins.

ITEMIZATION OF AMOUNT FINANCED table listing 13 items such as Cash Price of Vehicle, Warranty, Sales tax, Downpayment, Finance Charge, and Total Sale Price.

Seafirst may be retaining a portion of this amount. If this is a market rate contract, the periodic finance charge rate is subject to change in accordance with changes in the index. The index is now %.

DISCLOSURES table with columns: ANNUAL PERCENTAGE RATE, FINANCE CHARGE, Amount Financed, Total of Payments, Total Sale Price. Includes a payment schedule table below.

MARKET RATE CONTRACT: The figures marked with an "*" are subject to change because the Annual Percentage Rate ("APR") I pay may change. The APR may increase (or decrease) during the term of this Agreement if there is an increase (or decrease) in the monthly average of the 30 day Federal Reserve Certificate of Deposit Composite Rate ("Index Rate") as published in the Federal Reserve statistical release "S13 Selected Interest Rates" under the heading "CD5 (Secondary Market) 1-Month".

ASSIGNMENT BY DEALER TO BANK: SELLER HEREBY ASSIGNS THIS AGREEMENT TO SEAFIRST BANK PURSUANT TO DEALER'S AGREEMENT WITH BANK AS A NON-RECOURSE CONTRACT.

WARRANTY. In addition to any mechanical breakdown coverage you selected, unless another warranty page is attached to this agreement, the only express warranty which applies to the vehicle is the standard manufacturer's new vehicle warranty (or remaining portion, if any, on a used vehicle).

NOTICE TO BUYER: (1) Do not sign this contract before you read it or if any space intended for the agreed terms, except as to unavailable information, are blank. (2) You are entitled to a copy of this contract at the time you sign it. (3) You may at any time pay off the full unpaid balance due under this contract, and in so doing you may receive a partial rebate of the service charge. (4) The service charge does not exceed 0.9% per annum computed monthly.

Signed at Seller's address on APR 17 99. SELLER: TOPPING HYUNDAI, 4416 LACEY BLVD. S.E., LACEY, WA 98503. BUYER(S): JAMES L. HERSBERGER, MELISSA R. HERSHBE, 828 LACEY ST SE, LACEY WA 98503.

TERMS AND CONDITIONS

SALE OR RENT. I will not sell or rent the collateral without your written permission.

ENTIRE BALANCE DUE. If I miss a payment or break one of my promises under this agreement, you can require me without prior notice to pay the remaining balance and any charges at once. Since finance charges are not pre-computed, no unearned finance charges are due. You can also do this if I become insolvent or anything else happens that you believe endangers the collateral or my ability to pay, including seizure, levy or confiscation under any legal or governmental process against the collateral.

DELAY IN ENFORCEMENT. You can delay enforcing any of your rights under this agreement without losing them or any other rights.

OWNERSHIP AND USE OF COLLATERAL. I promise no one else has any claim on the collateral. I won't do anything that will create a claim against it. I'll deliver to you any certificates of title I have covering the collateral. I promise to use the collateral carefully and lawfully and keep it in good repair. I will not use the collateral for commercial purposes without your written permission. I will not use this collateral for residential purposes. I will not sell or transfer it or make any major alterations without your written permission. If the collateral is lost or damaged, I'll still have to pay any amounts I owe you.

OTHER COLLATERAL. I give you a security interest in all other collateral which secures any of my other obligations to you. If this contract is assigned, any collateral securing other extensions of credit held by an assignee, shall also secure this agreement.

AUTHORITY TO SIGN DOCUMENTS. In connection with the exercise of the creditor's rights and remedies under this agreement I irrevocably appoint you my attorney in fact with full authority to sign any documents necessary to transfer title to the collateral.

INSURANCE, TAXES, AND NOTICE. I will keep the collateral insured for its full insurable value. If I select my own insurance, the policy must be satisfactory to you. The policy is to include, but not limited to, a \$500 maximum deductible, comprehensive fire, theft, casualty) and collision coverage, and must name you as loss payee. If you ask, I will give you the policy and receipts.

If I get insurance through you, a description of my coverage and costs is shown on the front. If I don't qualify for the coverage you've ordered, you can order higher priced insurance for me and adjust my unpaid balance and payments as necessary.

If the collateral is lost or damaged, you can use the insurance proceeds to replace or repair it, or repay the debt. I will give you notice of such loss or damage within 24 hours of its occurrence.

I will also pay all taxes and fees on the collateral. You can insure your interest in the collateral or pay any tax if I don't. I will pay you back with interest at the Annual Percentage Rate indicated in the disclosure or any higher rate you specify which is allowed by law. You can add the cost to my unpaid balance and increase each remaining payment or require a larger final payment.

"WARNING" YOUR LOAN AGREEMENT, YOU MAY PURCHASE INSURANCE AT MY EXPENSE TO PROTECT YOUR INTEREST. THIS INSURANCE MAY, BUT NEED NOT, ALSO PROTECT MY INTEREST. IF THE COLLATERAL BECOMES DAMAGED, THE COVERAGE YOU PURCHASE MAY NOT PAY ANY CLAIM I MAKE OR ANY CLAIM MADE AGAINST ME. I MAY LATER CANCEL THIS COVERAGE BY PROVIDING EVIDENCE THAT I HAVE OBTAINED PROPER COVERAGE ELSEWHERE. I AM RESPONSIBLE FOR THE COST OF ANY INSURANCE PURCHASED BY YOU. THE COST OF THIS INSURANCE MAY BE ADDED TO MY LOAN BALANCE. IF THE COST IS ADDED TO THE LOAN BALANCE, THE INTEREST RATE ON THE UNPAID BALANCE WILL APPLY TO THIS ADDED AMOUNT. THE EFFECTIVE DATE OF COVERAGE MAY BE THE DATE MY PRIOR COVERAGE LAPSED OR THE DATE I FAILED TO PROVIDE PROOF OF COVERAGE. THE COVERAGE YOU PURCHASE MAY BE CONSIDERABLY MORE EXPENSIVE THAN INSURANCE I CAN OBTAIN ON MY OWN AND MAY NOT SATISFY WASHINGTON'S MANDATORY LIABILITY INSURANCE LAWS.

YOUR RIGHTS WITH RESPECT TO COLLATERAL IF I BREAK A PROMISE. You can repossess the collateral if I break one of my promises or don't make a full payment on time. If asked, I agree to deliver the collateral to you but you can take it yourself. You can take possession without giving any advance notice. I will be liable for all of your costs incurred or sums advanced in repossession and storage. You won't be responsible for anything left in or on the collateral. You can sell the repossessed collateral offering me at least ten days notice. You may apply the sale proceeds to my obligations under this agreement.

If you have the right to repossess the collateral or not you use this right you may cancel any insurance you provided or financed and apply the proceeds to my obligations under this agreement.

In addition to the above remedies for broken promises, if the obligation on the entire balance due has not been satisfied, I understand, at your option, you may convert the collateral to a fixed rate at the rate of the APR in effect at the time of change of rate.

ENTIRE AGREEMENT. I understand this agreement contains all our rights and responsibilities and no oral statements made in connection with the agreement will change this. Any change must first be approved by you in writing.

PROMISE TO PAY. I promise to pay you the Amount Financed indicated in the Itemization of Amount Financed on the reverse side. I also promise to pay a periodic Finance Charge computed daily on the balance of the Amount Financed at the Annual Percentage Rate shown in the Itemization. If this is a market rate agreement, the APR and the amount of my regular monthly payments are subject to change. In this case, I will pay the periodic finance charge at whatever APR is in effect. The Finance Charge may be less than the amount shown in the Disclosures if I pay early. It will be more, however, if I am late. You will apply each payment first to the periodic Finance Charge, next to the balance of the Amount Financed, and last to any late charges or collection charges. I will pay you according to the above payment schedule. Since the periodic Finance Charge is not pre-computed, there will be no unearned Finance Charge on prepayment.

COLLECTION CHARGES. I will pay all reasonable costs and collection charges incurred as a result of any default under this agreement, including your attorney's fees if the attorney is not your salaried employee. If any check given in payment on this loan is dishonored for insufficient funds, I will pay you an \$18.00 NSF fee. I will pay you a minimum fee of \$4.00 each time you call in an attempt to obtain correction of any default under this agreement.

HEIRS AND REPRESENTATIVES/LAW THAT APPLIES. My heirs and legal representatives are bound by this agreement. This agreement will be governed by the laws of the State of Washington.

RIGHT TO PREPAY/MINIMUM CHARGE. If I prepay what I owe to you in full or part, no refund for finance charge is due since finance charges are figured each day and not in advance. Prepayment, however, does reduce finance charges. There is a minimum finance charge if I pay off my purchase before that amount has been earned. The minimum is \$15 if the amount financed is less than \$250; \$25 if the amount financed is \$250 to \$500; \$37.50 if the amount financed is \$500 to \$1,000; and \$50 if the amount financed is over \$1,000.

The following only applies to a contract sale transaction by a Dealer of a used vehicle not covered under a new car warranty: THE INFORMATION THAT YOU SEE ON THE WINDOW FORM FOR THIS VEHICLE IS A PART OF THIS CONTRACT. INFORMATION ON THE WINDOW FORM OVERRIDES ANY CONTRARY PROVISIONS IN THE CONTRACT OF SALE.

THE OWNER OF A VEHICLE MAY BE REQUIRED TO SPEND UP TO \$100 ON A 1980 OR EARLIER MODEL VEHICLE OR UP TO \$200 ON A 1981 OR EARLIER MODEL VEHICLE FOR REPAIRS. IF THE VEHICLE DOES NOT MEET THE VEHICLE EMISSION STANDARDS UNDER RCW 70.94.210, UNLESS EXPRESSLY WARRANTED BY THE MOTOR VEHICLE DEALER, THE DEALER IS NOT WARRANTING THAT THIS VEHICLE WILL PASS ANY EMISSION TESTS REQUIRED BY FEDERAL OR STATE LAW.

THE FOLLOWING NOTICE REQUIRED BY FEDERAL REGULATION ONLY APPLIES IF THE AMOUNT FINANCED IS \$25,000 OR LESS OR THE COLLATERAL IS BEING USED AS A PRINCIPAL DWELLING. HOWEVER, EVEN IF THIS NOTICE DOES NOT APPLY, I MAY HAVE SIMILAR RIGHTS UNDER STATE LAW.

NOTICE: Any holder of this contract is subject to all claims and defenses which the debtor could assert against the seller of goods or services obtained pursuant hereto or with the proceeds hereof. However, no such claim or defense shall be a defense if the debt is secured by property of the debtor and the debt is not enforceable under Washington law.

NOTICE: ORAL AGREEMENTS OR ORAL COMMITMENTS TO LOAN MONEY, EXTEND CREDIT OR TO FORGIVE AN ARITHMETIC ENFORCING REPAYMENT OF A DEBT ARE NOT ENFORCEABLE UNDER WASHINGTON LAW.

STATE OF WASHINGTON VEHICLE CERTIFICATE OF TITLE

TITLE NUMBER
9912543427

LICENSE NUMBER	DATE OF APPLICATION	MODEL YEAR	MAKE	POWERBASE	SERIES & BODY STYLE
616JYW	05/05/1999	1995	SUBARU	G/PAS	IMP4D
VEHICLE IDENTIFICATION NUMBER (VIN)	FLEET/EQUIP NUMBER	SCALE WT.	SALE PRICE	MILEAGE	OCCUPANT CODE
JF1G6S5XSHS10167			0058054	ACTUAL MILEAGE	
COMMENTS/BRANDS			PRIOR TITLE STATE	PRIOR TITLE NUMBER	
18995 1896			FL		

SELLER'S NAME
HERSBERGER, JAMES L
HERSBERGER, MELISSA R
828 LACEY ST SE
LACEY WA 98503

BUYER'S NAME
AMERICREDIT FINANCIAL SRVC INC
P O BOX 9008
FORT WORTH TX 76147-2008

SIGNATURES OF REGISTERED OWNERS BELOW, HEREBY RELEASES ALL INTEREST IN VEHICLE DESCRIBED ABOVE.

BY _____ REGISTERED OWNER SIGNATURE _____ DATE OF SALE _____
BY _____ REGISTERED OWNER SIGNATURE _____ DATE OF SALE _____

SALE PRICE _____
VEHICLE IDENTIFICATION NUMBER (VIN) _____
VEHICLE REGISTRATION NUMBER _____

BY _____ FIRST LEGAL OWNER SIGNATURE & TITLE _____ DATE RELEASED _____

SECOND LEGAL OWNER SIGNATURE & TITLE _____ DATE RELEASED _____

LEGAL OWNERS: When this is applied, release interest by the seller. The seller must sign this form and present it to the County Auditor of each county where the vehicle is registered and transfer the title within 10 days of the date of sale. If the seller fails to do so, the County Auditor will issue a new title to the buyer. The seller is responsible for any taxes or fees that may be assessed on the sale.

ANY ALTERATION OR ERASURE VOIDS THIS TITLE

Seller: Please DETACH HERE STATE OF WASHINGTON - DEPARTMENT OF LICENSING Seller: Please DETACH HERE

VEHICLE SELLER'S REPORT OF SALE

REQUIRED WHENEVER OWNERSHIP CHANGES - INCLUDING DEALER TRADES
WARNING: THIS FORM DOES NOT TRANSFER TITLE

PLEASE PRINT OR TYPE - SEE IMPORTANT INSTRUCTIONS ON REVERSE SIDE

LICENSER NUMBER	MODEL YEAR	MAKE	VEHICLE IDENTIFICATION NUMBER (VIN)	POWERBASE	SERIES AND BODY STYLE	TITLE NUMBER
616JYW	1995	SUBARU	JF1G6S5XSHS10167	G/PAS	IMP4D	9912543427



TRANSEFEROR/SELLER: To be released from civil/criminal liability for the operation of the vehicle you must fill in this form COMPLETELY. The completed form MUST be delivered to your local licensing agent, or mailed, and delivered, to the Department of Licensing, within 5 days from the date of delivery of the vehicle to the buyer.	State of Washington Department of Licensing P.O. BOX 9038 OLYMPIA WA 98507-9038
NAME OF SELLER/PURCHASER/TRANSFEROR	NAME OF PURCHASER/TRANSFEREE
COMPLETE ADDRESS OF SELLER/PURCHASER	COMPLETE ADDRESS OF PURCHASER/TRANSFEREE
CITY STATE ZIP CODE	CITY STATE ZIP CODE
DATE VEHICLE WAS SOLD	TODAY'S DATE
VEHICLE PURCHASE PRICE	SELLER/PURCHASER'S SIGNATURE
<input checked="" type="checkbox"/>	

457 The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (800) 902-3600 or TDD (360) 564-4885.

THE ATTACHED IDAHO CERTIFICATE OF TITLE IS THE LEGAL OWNERSHIP DOCUMENT FOR YOUR VEHICLE OR VESSEL. DO NOT CARRY IT IN YOUR VEHICLE OR VESSEL. KEEP IT IN A SECURE PLACE. UPON SALE OR TRANSFER OF THIS VEHICLE OR VESSEL, THE NEW OWNER MUST APPLY FOR TITLE WITHIN 30 DAYS TO AVOID A \$20.00 PENALTY.

AMERICREDIT FINANCIAL
 SERVICES INC
 PO BOX 183003
 ARLINGTON TX 76096-9962

DETACH HERE

0008501621 DVS01182

635

IDAHO
CERTIFICATE OF TITLE

VEHICLE IDENTIFICATION NUMBER: **JF1GC655XSH510167**
 2ND VEHICLE IDENTIFICATION NUMBER: _____
 ODOMETER READING: **63622 ACTUAL** DATE: **04/28/2000**

TITLE NUMBER: **003017261** EXPIRES DATE: **06/05/2000**
 WEIGHT: _____ LENGTH: _____ WIDTH: _____ HULL: _____ HORSEPOWER: _____ PROPULSION: _____

OWNER'S NAME AND ADDRESS: **HERSHBERGER, JAMES L OR
 HERSHBERGER, MELISSA R
 6709 DOUGLAS ST
 BOISE, ID 83704**

OTHER PERTINENT DATA: _____

Assignment of Title
 Federal and state law requires that you sign this release in conjunction with the transfer of ownership. Failure to complete the purchaser's section of this statement may result in fines and/or imprisonment.

1. ODOMETER READING - Reading in actual words (thousand, hundred, etc.)
 (NO TENTHS) _____ DATE: _____
 In Excess of Mechanical Limits Eighty
 Not Actual; Warning: Odometer Discrepancy No Detail

2. DATE SOLD: _____ SELLING PRICE: _____

3. BUYER'S PRINTED NAME(S) _____ ADDRESS _____
 CITY _____ STATE _____ ZIP _____

4. I certify, to the best of my knowledge, that the odometer reading reflects the actual mileage, unless otherwise indicated. I also hereby release my interest and title ownership to the named purchaser. SELLER'S REPRESENTATIVE'S SIGNATURE: _____
 A. X _____
 B. X _____

5. PURCHASER'S PRINTED NAME(S) _____
 6. PURCHASER'S REPRESENTATIVE'S SIGNATURE: _____
 A. X _____
 B. X _____

Lienholder Section

FIRST LIEN: **AMERICREDIT FINANCIAL
 SERVICES INC
 PO BOX 183003
 ARLINGTON, TX 76096-9962
 RECORDED 05/05/1999**

SECOND LIEN: _____

10. SIGNATURE RELEASING LIEN: _____ DATE: _____
 X _____

11. NEW LIENHOLDER'S NAME: _____
 12. ADDRESS: _____
 13. CITY _____ STATE _____ ZIP _____

14. SIGNATURE RELEASING LIEN: _____ DATE: _____
 X _____

04380170

VOID IF ALIENED

EAGLE WATERMARK VISIBLE IF HELD TO LIGHT

\$2.00 Fee NOTICE OF RELEASE OF LIABILITY \$2.00 Fee
PLEASE PRINT CLEARLY — ALL INFORMATION MUST BE COMPLETE — NOTIFICATION BY SELLER IS MANDATORY

Vehicle Identification Number (VIN): **JF1GC655XSH510167** Year: **1995** Make: **SUBA** Body Style: **4D** Title Number: **003017261**

Seller's Full Name: _____ Phone Number: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Odometer: _____ Selling Price: \$ _____ Date Vehicle Delivered to Purchaser: _____

Purchaser's Full Name: _____
 Address: _____ City: _____ State: _____ Zip: _____

I/we hereby request that the Idaho Transportation Department mark its motor vehicle records to indicate that I/we have transferred the vehicle described above under the provisions of Section 49-576, Idaho Code, which addresses vehicle transfers. However, I/we understand that the motor vehicle record will remain in my name until a new Idaho Certificate of Title is applied for and issued recording the name of the new owner.

X _____
 (Signature of Seller(s))

— SEE REVERSE SIDE FOR MAILING/PAYMENT INSTRUCTIONS —