GEORGIA MVD - RECEIPT (COPY)

JACOB ADAM SAVAGE
875 CLARION WAY
LAWRENCEVILLE GA 30044-6112
2026 PLSR MP
0164
Purchase Date: 07-Aug-2026
Application Date: 30-Sep-2026

LIEN 1 OF 1
VCFS LIEN COMPANY LLC
6150 OMNI PARK DR
MOBILE AL 36609-5195

Fee	Amount
Annual Registration Fee	$20.00
Alternative Fuel Vehicle Fee	$238.59
Title Fee	$18.00
Title Late Penalty	$10.00
Title Ad Valorem Tax	$1,561.71
Title Ad Valorem Dealer Penalty	$78.09
	$1,926.39

STATE OF GEORGIA
MOTOR VEHICLE REGISTRATION

YSRPB3A40TK003029 - 2026 PLSR 4 **MP**

Tag Number:	**SPU6846**	Expires:	**17-Oct-2027**
Title Number:	**770290295855016**	Tag Fee:	**20.00**
County:	**Gwinnett**	Fuel:	**Electric**
District:	**13**		
Farm Veh?	**No**	GVW:	**0**
Equip No:		Color:	**GRAY**
Classification:	**A1 - Standard Alternate**		
Insurance Status:	**Valid Insurance Coverage**		
Customer 1 No:		Customer 2 No:	
Authentic			**LEASED**
Historical Plate:			

JACOB ADAM SAVAGE
875 CLARION WAY
LAWRENCEVILLE GA 30044-6112

Signature: _____

DENISE R. MITCHELL, MPA
Gwinnett County Tax Commissioner
PO BOX 829
LAWRENCEVILLE GA 30046-0829
(770) 822-8818

JACOB ADAM SAVAGE
770290295855016
0164
Purchase Date: 07-Aug-2026
Application Date: 30-Sep-2026

36156405

Fee	Amount
Annual Registration Fee	$20.00
Alternative Fuel Vehicle Fee	$238.59
Title Fee	$18.00
Title Late Penalty	$10.00
Title Ad Valorem Tax	$1,561.71
Title Ad Valorem Dealer Penalty	$78.09
	$1,926.39

Check

THIS IS NOT A BILL
THIS IS YOUR RECEIPT
***** RETAIN FOR TAX PURPOSES**

STATE OF GEORGIA
MOTOR VEHICLE REGISTRATION

YSRPB3A40TK003029 - 2026 PLSR 4 **MP**

Tag Number:	**SPU6846**	Expires:	**17-Oct-2027**
Title Number:	**770290295855016**	Tag Fee:	**20.00**
County:	**Gwinnett**	Fuel:	**Electric**
District:	**13**		
Farm Veh?	**No**	GVW:	**0**
Equip No:		Color:	**GRAY**
Classification:	**A1 - Standard Alternate**		
Insurance Status:	**Valid Insurance Coverage**		
Customer 1 No:		Customer 2 No:	
Authentic			**LEASED**
Historical Plate:			

JACOB ADAM SAVAGE
875 CLARION WAY
LAWRENCEVILLE GA 30044-6112

Signature: _____