vitu

Cover Sheet - GA

Process Date	Transaction Id
09/18/2026	188773088
Titling State	**Military**
GA	N

2T3C1RFV2RC266387 2024 TOYOTA
Used Passenger

Vehicle Info

Model: RAV4
Body Type: Sport Utility Vehicle
GVW: 3405
Fuel Type: Gas
Odometer Reading: 12701

Sale Information

Purchase Date: 09/11/2026
Sale Type: Purchase
Taxable Selling Price: 36,880.00
MSRP:
List Price:
Trade In Value:

Owner Info

Owner 1 Name: CAMELIA LAWSON
Owner 2 Name:
Residence Address: 541 NEAL DR, ROSSVILLE, Catoosa, GA, 30741
Lessor Name:
Address:

Lienholder Info

Lienholder 1 Name: CARVANA LLC
Address: PO BOX 2995, PHOENIX, AZ, 85062
Lienholder 2 Name:
Address:
Lienholder 3 Name:
Address:

Registration Information

Application Type: Title Only
Registration Action:
Registration Period:
Plate Number:
Expiration Date:

Final Destination

Send to: LAWSON CAMELIA
Phone: (423)834-4865
Mailing Address: 541 NEAL DR, ROSSVILLE, Catoosa, GA, 30741

Fee Summary

TITLE AD VALOREM TAX (7%)	$2,581.60
TITLE	$18.00
VITU FULL SERVICE FEE	$135.00
GA STATE VARIABLE FEES	$.00
Total	**$2,734.60**

Submitted By: Claudia Lombardo
Phone: (602)574-1310
Location: Carvana Processing
Address: 1305 W 1st Street, Tempe, Maricopa, AZ, 85281

RECEIVED
SEP 21 2026
BY:

For Vitu use

Pre-Checker Name

Comments / Resolution:

For your paperwork to be processed faster, please send your transaction documents in the order they are listed on the checklist. Thank you!

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GEORGIA MVD - RECEIPT (COPY)

CAMELIA BREANN LAWSON
541 NEAL DR
ROSSVILLE GA 30741-3492
2024 TOYT MP
0371
Purchase Date: 11-Sep-2026
Application Date: 28-Sep-2026

Fee	Amount
Annual Registration Fee	$20.00
Title Fee	$18.00
Title Ad Valorem Tax	$2,581.60
Mail Fee	$1.00
	$2,620.60

LIEN 1 OF 1
CARVANA LLC
300 E RIO SALADO PKWY
STE 1
TEMPE AZ 85281-0800

STATE OF GEORGIA
MOTOR VEHICLE REGISTRATION

2T3C1RFV2RC266387 - 2024 TOYT RAV4 **MP**

Tag Number:	**SPM6738**	Expires:	**12-Sep-2027**
Title Number:	**770290263957037**	Tag Fee:	**20.00**
County:	**Catoosa**	Fuel:	**Gasoline**
District:	**01**		
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			
Historical Plate:			

CAMELIA BREANN LAWSON
541 NEAL DR
ROSSVILLE GA 30741-3492

Signature: _____