Spring Creek Family Medicine, PLLC
310 Wendell Ave, Suite 1
Lewistown MT 59457
406-535-1530

SENATE HIGHWAYS AND TRANSPORTATION
EXHIBIT NO. 6
DATE 3-3-2011
BILL NO. HB 213

Michael Sura MD
8/10/2010

NAME: Tracy Drube DOB: 11/26/1965
ADDRESS: 501 W. Erie Lewistown MT 59457
DATE:

To: North Central Independent Living Services

Please consider people with disabilities to have golf charts to enhance their daily functions.

PHYSICIAN SIGNATURE: _____
Michael Sura MD

CLUB CAR, INC.
P.O. Box 204658
Augusta, Georgia 30917-4658
Telephone 706/863-3000
FAX 706/860-7231

[redacted]

Control No.

play to win

MANUFACTURER'S STATEMENT OF ORIGIN

The undersigned, Club Car, Inc., a Delaware corporation, hereby certifies that the new vehicle described below, the property of said corporation, was transferred on AUG. 24, 20 07, Invoice No. 409975,

to: HUSQVARNA FOREST & GARDEN

whose address is 7349 STATESVILLE RD

CHARLOTTE NC 28269-3702

(Street), City, State, Zip Code)

Trade Name CLUB CAR Year 2008 Series/Model HUV4210-EXP

Body Type GOLF CAR Serial No. HF0802858424

The corporation further certifies that this was the first transfer of such vehicle in ordinary trade and commerce.

This 05 day of OCTOBER, 20 07.

CLUB CAR, INC.

BY: _____
As its duly authorized reprsentative

Ingersoll Rand

(Over)

Miller #23309-U Rev. 01/05

This Manufacturer's Statement of Origin is valid only if presented with colored background.

7300/921001

ASSIGNMENT OF OWNERSHIP

UPON ASSIGNING OWNERSHIP OF THIS VEHICLE TO A NEW OWNER, PLEASE SEND A COMPLETE COPY OF THIS DOCUMENT TO:

CLUB CAR, INC.
P.O. Box 204658
Augusta, Georgia 30917-4658

ATTN: VEHICLE REGISTRATION

FIRST ASSIGNMENT:

For value received, I (we) hereby sell, assign and transfer ownership of the vehicle described on the reverse side hereof, free and clear of all liens and encumbrances, to:

Buyer's Name: LEWISTOWN TRUE VALUE

Address: 301 W. MAIN

LEWISTOWN, MT 59457

Seller's Signature: [illegible] - Hospuasna

Date: 10/9/07

Barbara K Thandani
Notary Public
(Notary Seal)

My Commission Expires 4-11-2009

SECOND ASSIGNMENT:

For value received, I (we) hereby sell, assign and transfer ownership of the vehicle described on the reverse side hereof, free and clear of all liens and encumbrances, to:

Buyer's Name: Tracy Drube

Address: Po Box 382

Lewistown, MT 59457

Seller's Signature: Hazel Peterschick - True Value

Date: 10-22-07

Tina Manley
Notary Public
(Notary Seal)

expires: 1-18-2009

NOTARY PUBLIC STATE OF MONTANA

THIRD ASSIGNMENT:

For value received, I (we) hereby sell, assign and transfer ownership of the vehicle described on the reverse side hereof, free and clear of all liens and encumbrances, to:

Buyer's Name: _____

Address: _____

_____

Seller's Signature: _____

Date: _____

Notary Public
(Notary Seal)

PLATE 8 A1596 DATE 11062007 H420824
MONTANA VEHICLE REGISTRATION AND PAYMENT RECEIPT
TAXES PAID THROUGH 99999999 VALID THROUGH 99999999

-VEHICLE INFORMATION:----------
TYP YR MAKE MODL STYL COLOR VIN
QD 2008 CLUB ATV ~~BH~~ TLW ONG HF0802858424
TTL G952975 SLDT 11062007 TKTRC GCW/MGVW 000000
BRAND ORIGINAL
PLT1 8 A1596 TYP MC BCK PERM SPEC MC TAB
FUEL TYPE 5 EQUIP NO UNLADEN WGT 00000 TON
ENG 0001 LNGTH EXEMPT STATUS

DRUBE,TRACY
PO BOX 382
LEWISTOWN MT 59457

-FEE INFORMATION:----------
72 MHPFEE 5.00 32 TTLVEH 10.00 06 MCFLAT 53.25
57 MCSAFE 16.00 70 NEWISS 5.00 35 TTLCDR 10.00

-COUNTY INFORMATION:----------
TAXVAL 0.00 CO 08 SCH PRORT 00 FEE N
VEHVAL 1.00 MILL 0.000 PCC TREAS DEP 01
CALCVAL ASSD DATE 11062007 ASSD BY
REGISTRATION TYPE: PERMANENT

UNLAWFUL TO OPERATE VEH W/OUT VALID VEH LIABILITY INSURANCE POLICY, CERTIFICATE OF SELF-INSURANCE, OR POSTED INDEMNITY BOND, AS REQUIRED BY 61-6-301, UNLESS EXEMPT BY 61-6-303.

STATE OF MONTANA DEPARTMENT OF JUSTICE MOTOR VEH DIVISION

OPID 0801

STATE $ 99.25 COUNTY $ 0.00 TOTAL AMT $ 99.25
ORIGINAL - OWNER FILE/1 COPY - OWNER

Storfa's Service, LLC
408 1st Ave N
Lewistown, MT 59457
storfas@midrivers.com

17819

REPAIR ORDER

DSS	ISJ	LABOR CHARGE
Lubrication ◯		
Change Oil ◯		
Change Oil Filter Cart. ◯		
Change Trans. ◯		
Change Diff. ◯		
Pack Front Wheel Brgs. ◯		
Adjust Brakes ◯		
Rotate Tires ◯		
Wash Polish ◯		
State Inspection ◯		

NAME: Tracy Drake
DATE: 10/15/07
ADDRESS:
MAKE: Plymouth
TYPE OR MODEL: HLV
YEAR:
RECEIVED: A.M. P.M.
SERIAL NO.:
ENGINE NO.:
PROMISED: A.M. P.M.
SPEEDOMETER:
LICENSE NO.:
TERMS:
PHONE WHEN READY: YES ☐ NO ☐
ORDER WRITTEN BY:
PHONE:
OPER. NO.:

INSTRUCTIONS

St legal -

Install Tail/Brake lights. Install Mirror
Install turn Signal Switch. Flasher and turn
Signal lamps.

MATERIAL USED

QUAN.	PART NO.	DESCRIPTION	PRICE	
1	FSH550	Flasher	6	62
2	94100	Connector 55/ea	11	06
2	LTE4553	Marker light 3.94/ea	7	88
1	XSM 160	Turn Sig Switch	65	63
2	Turn Sig lamps	4.08	8	16
1	Brake light Switch		11	95
	Wire		8	00
	Connectors		7	00
2	30728	Bracket 7.75	15	50
1	Mirror		22	00
			161	80

OUTSIDE REPAIRS

BROUGHT FORWARD

TOTAL PARTS

QUAN.	ACCESSORY NO.	ACCESSORIES	PRICE	

TOTAL ACCESSORIES

I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the car or truck herein described upon streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above car or truck to secure the amount of repairs thereto.

X

NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE BEYOND OUR CONTROL.

GAS, OIL & GREASE	PRICE	
GALS. GAS @		
QTS. OIL @		
LBS. GREASE @		
TOTAL GAS, OIL & GREASE		

TOTAL LABOR 1.5	225	00
TOTAL PARTS	161	80
ACCESSORIES		
GAS, OIL & GREASE		
OUTSIDE REPAIRS		
Shop Mat	2	50
TAX		
TOTAL AMOUNT	389	30

10030
249.00
DASH