

Total Pages Transmitted Including Transmittal	FACSIMILE TRANSMITTAL	Date Transmitted
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Please deliver the following page(s).

TO: Vehicle Records **FAX:** (608) 267-6966

FROM: Name: _____ **FAX:** (____) _____
 Dealer/Agent Name: _____ **Telephone:** (____) _____
 Terminal ID #: _____

- MESSAGE -

Complete the information below, including the full mailing address, to have a secured party number assigned to the lender. (Please type or print clearly).

Secured Party Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____

The information above is the name and address to be shown on the lien confirmation.

- I have checked the secured party number listing on the system but couldn't find a number for this lender.
- I have called the lender for the proper secured party number but they were unable to provide it to me.
- CVR ONLY:** I called the help desk for assistance and spoke to: _____.

If the secured party number you receive doesn't work on your system or if you don't receive the secured party number within 24 hours, contact the Help Desk for assistance.

Include this form in the bundle with the paperwork for the transaction which required assignment of a secured party number.