

PAGE 2 - MANUFACTURERS QUARTERLY REPORT

DEALER: _____ **West Virginia Manufactured**
Housing License #: **WV00** _____

ADDRESS: _____ CITY: _____ STATE : _____ ZIP: _____

HUD LABEL #: _____ MFG. SERIAL #: _____

DATE UNIT COMPLETED: _____ TYPE: _____ SINGLE _____ MULTI _____

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