



Comprehensive Auto Resources Company

NON-AUTO GAP MONTHLY REMITTANCE REGISTER

Dealer Name: _____ Month Ending: _____

Address: _____ Batch No. _____

City: _____ State: _____ Zip: _____

Consumer Name	Certificate #	Net Remittance
1		\$
2		\$
3		\$
4		\$
5		\$
6		\$
7		\$
8		\$
9		\$
10		\$
11		\$
12		\$
13		\$
14		\$
15		\$
16		\$
17		\$
18		\$
19		\$
20		\$

Amount Due Administrator \$	Check No:	Check Amt: \$
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Make check payable to Carco and mail to: P.O. Box 1268 Exton, PA 19341