

_____ **CHURCH**
DRIVER CERTIFICATION

Date of this Certificate: _____

Driver's Name: _____

Address: _____

Soc. Sec. No.: _____

Driver's "License" No.: _____

Date of Expiration: _____ **Issuing State:** _____

"Automobile Liability Insurance":

Name of Company: _____

Effective Dates of Coverage: _____

Limits of Coverage: _____

Date of First Proposed Travel: _____

To: _____ **(the "Church")**

By signing below, the undersigned Driver hereby certifies and swears that:

1. I possess a valid driver's License;
2. _____ I have not been stopped for suspicion of, arrested for, or convicted of driving while under the influence of drugs or alcohol at any time, in any state, or in any country (an "Incident").
_____ I have been involved in these Incident(s): (Please provide dates and details.)

3. _____ I have never had my License suspended or revoked.
_____ I have had my License suspended or revoked. (Please provide dates and details.)

4. I have valid "Automobile Insurance" in effect at this time. The details of this Insurance coverage are accurately set forth above.
5. _____ I have never been sued as a defendant in a lawsuit involving damages which I caused to another person in the use of an automobile or other moving vehicle.
