Authorization to Obtain Motor Vehicle Record

THE UNDERSIGNED DOES HEREBY ACKNOWLEDGE AND CERTIFY AS FOLLOWS:

1. Certifies that the undersigned is an employee, or has applied to become an emploof the below named employer in a position which involves the operation of a movehicle and the undersigned gives his or her consent to the release of their driving record (MVR) for review by: VENTURA DIRECTIONAL DRILLING Name of Employer or Potential Employer 2. That the undersigned authorizes his or her driving record to be periodically obtated and reviewed for the purpose of initial and continued employment. 3. That all information presented in this form is true and correct. The undersigned makes this certification and affirmation under penalty of perjury and understand knowingly making a false statement or representation on this form is a criminal violation. Name of Employee/potential employee: Print name as it appears on driver's license License Number & State: License Number & State:	tor g
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	s that
License Number & State:	
Date of Birth:/	
Signature of employee/potential employee:	
Date:	
Employer Authorized Representative Name: DARCY SHEPLEY	

Authorized Representative Signature: