

Patricia M. Clancy
Clerk of Courts
Hamilton County Court House
Room 115 1000 Main St.
Cincinnati, Oh 45202

_____20_____

CASE NO. _____

Attn: Mr. Jerry Poland

Re: Plaintiff _____

-vs-

Defendant _____

Address _____

City, State, Zip _____

Dear Sir:

With the information listed below, will you please take the necessary steps for the revocation of driver's license and plates?

Date of Birth Mo. _____ Day _____ Year _____

Driver's License No. _____ State _____

Type: Chauffeurs _____
 Operators _____
 Temporary _____

License Plate No. _____ Year _____

Social Security No. _____

Date of Accident Month _____ Day _____ Year _____

Date of Judgment _____ Day _____ Year _____

Amount of Judgment \$ _____

Remarks and additional information

Very truly yours,

