



## DIVISION OF DRIVER LICENSING

## REPORT ON CIVIL JUDGMENT INVOLVING A MOTOR VEHICLE ACCIDENT

PLAINTIFF		VS	DEFENDANT	
DEFENDANT ADDRESS ( <i>street</i> )		CITY	STATE	ZIP
OPERATOR LICENSE #		STATE	DATE OF BIRTH	
CASE #	DATE OF ACCIDENT	DATE OF JUDGMENT		

Check the appropriate box.

- JUDGMENT UNSATISFIED:** I hereby certify that the information listed above is evidence that a judgment has been entered into this court in the above-styled case, that no appeal has been taken from said judgment, and that sixty days have elapsed since the judgment was rendered.
- This judgment is for personal injury/death caused by the debtor's operation of a motor vehicle in which the debtor was intoxicated from using alcohol, a drug, or other substance.
- PAYMENT-BY-INSTALLMENTS ORDER:** I hereby certify that pursuant to KRS 187.440 an order authorizing payment by installments has been entered in this court in the above-styled case.
- DEFAULT ON INSTALLMENT ORDER:** I hereby certify that evidence is on file in this court that the debtor in the above-styled case is in default on the payment-by-installment order.
- JUDGMENT FULLY SATISFIED:** I hereby certify that there is on file in this court evidence that the judgment rendered in the above-styled case has been fully satisfied and that all court costs have been paid.
- JUDGMENT SATISFIED THROUGH BANKRUPTCY:** I hereby certify that there is evidence on file in this court that the judgment rendered in the above-styled case was discharged through bankruptcy.
- JUDGMENT SET ASIDE OR ISSUED IN ERROR:** I hereby certify that there is evidence on file in this court that the judgment has been set aside and/or was issued in error.

CERTIFICATION DATE	CERTIFYING CLERK			
NAME OF COURT	CITY	COUNTY	STATE	
ATTORNEY	PHONE			
ADDRESS ( <i>street</i> )	CITY	STATE	ZIP	