

# I.C.U. Inc.

1-888-342-7737  
FAX (866) 329-8787



## DRIVING RECORD CHECK California & Virginia \$200.00 All Other States \$50.00

*This order form/disclaimer must be filled out  
entirely for us to process your request*

Orders will not be taken from or concerning Massachusetts residents.

Do you really know the man you are about to give your daughter to? How about your new delivery person? A driving record check provides you with good insight to that persons character.

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> California             | <input type="checkbox"/> Reg. Price: \$200 | <input type="checkbox"/> Rush Price:\$300  |
| <input type="checkbox"/> Virginia               | <input type="checkbox"/> Reg. Price: \$200 | <input type="checkbox"/> Rush Price: \$300 |
| <input type="checkbox"/> All other states _____ | <input type="checkbox"/> Reg. Price: \$50  | <input type="checkbox"/> Rush Price: \$75  |

The only information we require is the name, social security number, date of birth, and state you want checked.

\*There will be a \$50.00 sur charge if a social security number is not provided.

NAME		*SOCIAL SECURITY NUMBER
DATE OF BIRTH	STATE TO BE CHECKED	
SPECIAL INSTRUCTIONS OR INFORMATION		

### THE REASON I AM REQUESTING THIS INFORMATION IS (Check One)

- I am attempting to contact an old friend or relative
- I am requesting information in regards to civil litigation: *(If pending, fill in "pending")*

Case No. \_\_\_\_\_ Court Name \_\_\_\_\_

**NOTE:** All information requests are held in confidence. No information will be disclosed to the person about whom you are requesting information.

I hereby affirm, certify and swear that the reason that I have requested this information is for the sole reason stated above, and that I have bona fide reason to request this information. I also swear that this information will not be used for anything illegal, immoral, obscene, or violent. I authorize you to bill my credit card, and agree to pay the issuing bank in accordance with my cardholder agreement.

### CREDIT CARD INFORMATION Visa, MasterCard, American Express, Discover

CARDHOLDER NAME	CARDHOLDER ADDRESS		
CITY, STATE, ZIP	PHONE NO.		
CARD NUMBER	EXPIRATION DATE		

### SEND THE INFORMATION TO ME: (Please Check Only One Item Below)

- By mail at the above address
- By fax at this number \_\_\_\_\_
- By E-Mail at this address \_\_\_\_\_

SIGNATURE \_\_\_\_\_