



ANGELA VICK
CLERK OF THE CIRCUIT COURT - CITRUS COUNTY, FLORIDA

Clerk of the County Court
Recorder of Deeds
Clerk and Accountant of the Board of County Commissioners
Custodian of County Funds
County Auditor

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DRIVER LICENSE ACKNOWLEDGEMENT FORM

Name

Case Number

I acknowledge that per Florida Statute 322.15, the Clerk of the Courts can provide me with a D6 Clearance form that allows the reinstatement of the driver license suspension that was issued for non-payment of the above case number.

I further acknowledge that I must provide proof of a valid and reinstated driver license to the Clerk of Courts by the close of business 30 days from today. Failure to provide such proof within the required 30 day period will result in the re-suspension of my driver license for this case and the assessment of additional fees.

STATE OF FLORIDA
COUNTY OF CITRUS

Signature

THE FOREGOING INSTRUMENT WAS
ACKNOWLEDGED BEFORE ME THIS _____ BY
_____ WHO IS PERSONALLY
KNOWN TO ME OR WHO HAS PRODUCED
_____ AS IDENTIFICATION AND WHO
DID (DID NOT) TAKE AN OATH.

ANGELA VICK
Clerk of the Circuit Court and Comptroller

By: _____,
Deputy Clerk

SIGNATURE OF NOTARY

PRINT, TYPE, OR STAMP NAME OF NOTARY