SR-22	FINANCIAL	RESPONSI	BILITY FORM		
Name	Last		First	Middl	P
Insured $\left\{ \begin{array}{c} Addres \end{array} \right.$			i iist	Widd	
Case Number	Driver's License Nu	umber	Birth Date	Social So	ecurity Number
Current Policy Numl This certification is e terminated in accord	per effective from ance with the financial	responsibi	_Effective From	and continue ons of this Stat	es until cancelled or e.
The insurance hereby OWNER'S F thereof by similar	y certified is provided l OLICY: Applicable t classification, and (c) 00 days from the date c	by an: o (a) the f any additi	ollowing described volume on ally acquired vehi	vehicle(s), (b)	any replacement(s)
Model Year	Trade Name		Identification Number		
OPERATOR?	S POLICY: Applicabl	e to any no	n-owned vehicle.		
effective date of this Name of Insurance C Date	Company <u>MG</u>	A Insurance	Company Inc.	hu	
SR-22			Signature of Authorized	Representative	
Name					
Insured { Address	Last		First	Middl	e
Case Number	Driver's License Nu	umber	Birth Date	Social Security Number	
Current Policy Num	ber effective from		_Effective From	1 (	
his certification is e	ance with the financial	responsibi	lity laws and regulati	and continue	es until cancelled or
The insurance hereby OWNER'S F thereof by similar	y certified is provided POLICY: Applicable t classification, and (c)	by an: o (a) the f any additi	ollowing described volume on ally acquired vehi	vehicle(s), (b)	any replacement(s)
Model Year	days from the date of acquis Trade Name		Identification Number		
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	S POLICY: Applicabl	e to any no	n-owned vehicle		
				CEDTIFICA	TIP
IEX	AS FINANCIAL RE	SPUNSIBI	LITY INSUKANCE	LUEKTIFICA	IL

The company signatory hereto hereby certifies that it has issued to the above named insured a motor vehicle liability policy as required by the financial responsibility laws to this State, which policy is in effect on the effective date of this certificate.

Name of Insurance Company	v	MGA Insurance Company Inc.
Date	By	All Ander
		Signature of Authorized Representative

Enclosed Please Find SR-22 Forms.					
Should You Have Any Questions Please Contact					
Our Customer Service Department at					
1(800) 699-1561					
Thank Vou					

Thank You. GAINSCO Auto Insurance