

FINANCIAL RESPONSIBILITY FORM

Insured { Name Last First Middle Address

Table with 4 columns: Case Number, Driver's License Number, Birth Date, Social Security Number

Current Policy Number Effective From This certification is effective from and continues until cancelled or terminated in accordance with the financial responsibility laws and regulations of this State.

The insurance hereby certified is provided by an:

OWNER'S POLICY: Applicable to (a) the following described vehicle(s), (b) any replacement(s) thereof by similar classification, and (c) any additionally acquired vehicles of similar classification for a period of at least 30 days from the date of acquisition.

Table with 4 columns: Model Year, Trade Name, Identification Number

OPERATOR'S POLICY: Applicable to any non-owned vehicle.

TEXAS FINANCIAL RESPONSIBILITY INSURANCE CERTIFICATE

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 MGA Insurance Company, Inc. Date By Signature of Authorized Representative

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