Date

Driver License Section

P.O. Box 30340

Honolulu, HI 96820-0340

Re: Hawai‘i Drivers License Certified Verification

Dear Sir/Madam:

I am requesting a certified letter verifying my Hawai‘i Driver License. My information is as follows:

Name (as it appears on the license):

Address:

Social Security Number (last 4 digits) or Hawai‘i Driver License #:

Date of Birth:

E-mail address:

Please send letter to: Name

Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Client Name/Signature Date