

**Subject:**  
**Number:**

**Transporting Clients or Program Participants**  
**3.15.01**

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**DRIVER'S STATEMENT – B**  
(For use with Drivers operating company supplied vehicles)

As a driver for \_\_\_\_\_, I attest that I have a current and  
(service site)

valid driver's license that is in good standing with the State of Ohio.

I have been provided with a copy of the Transporting Clients or Program Participants  
policy.

Driver's signature: \_\_\_\_\_

Driver's Name: \_\_\_\_\_  
(Please Print)

Date: \_\_\_\_\_