



Driver's License Protection Pledge

I, _____, pledge to the citizens of the
Print full name
_____ district and the citizens of California
Number and office (example: 8th Assembly)
that I will:

OPPOSE all efforts to grant valid California driver's licenses and other legal documentation to individuals breaking our nation's immigration laws.

Signed: _____ Date: _____

Print Name: _____

Forms must be completely filled out, signed and dated. Return pledge form to:

Save Our License • P.O. Box 877 • Monrovia, CA 91017
or fax: (916) 858-8274