

# STATE OF ALASKA

TONY KNOWLES, GOVERNOR

**Department of Administration**  
*Division of Motor Vehicles*

## \*DRIVING RECORD RELEASE FORM\*

I, \_\_\_\_\_, do hereby authorize the  
(PLEASE TYPE IN ALL INFO)

Department of Administration, Division of Motor Vehicles, to release my  
driving record to: MVR's Inc. and Daniel D. Stevens, Inc.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_  
(PLEASE TYPE IN ALL INFO)

Alaska Drivers License #: \_\_\_\_\_  
(PLEASE TYPE IN ALL INFO)

SSN#: \_\_\_\_\_  
(PLEASE TYPE IN ALL INFO)

Date of Birth: \_\_\_\_\_  
(PLEASE TYPE IN ALL INFO)