

MVR Account No. \_\_\_\_\_

# STATE OF ALASKA

TONY KNOWLES, GOVERNOR

*Department of Administration*  
*Division of Motor Vehicles*

## \*DRIVING RECORD RELEASE FORM \*

I, \_\_\_\_\_, do hereby authorize the

Department of Administration, Division of Motor Vehicles, to release my

driving record to: \_\_\_\_\_.

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

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

Alaska Drivers License #: \_\_\_\_\_

SSN#: \_\_\_\_\_

Date of Birth: \_\_\_\_\_