

STATE OF ALASKA

DEPARTMENT OF ADMINISTRATION
DIVISION OF MOTOR VEHICLES

PO Box 110221
JUNEAU, ALASKA 99811
PHONE: (907) 465-4361
FAX: (907)-465-5509

ALASKA DRIVING RECORD RELEASE FORM

I, _____, do hereby authorize the Department of Administration, Division of Motor Vehicles, to release my driving record to: Datalink Services, Inc / Mark Haddy

- Full Driving History
- 3 years Driving History
- CDL

Signature: _____

Date: _____

Alaska Drivers License: _____

SSN: _____/_____/_____

Date of Birth: _____/_____/_____