



DEPARTMENT OF TRANSPORTATION
DRIVER AND MOTOR VEHICLE SERVICES
1905 LANA AVE NE, SALEM OREGON 97314

AFFIDAVIT TO AUTHORIZE RELEASE OF EMPLOYMENT DRIVING RECORD WITH DRUG TEST RESULT INFORMATION

Use this form to obtain the Employment Driving Record with drug test result information.

1. The form must be completed in full.
2. Include a fee of \$2.00 for the record.
3. Send completed form and fee to:

**DMV Record Services Unit
1905 Lana Ave NE
Salem, OR 97314**

I, _____ ,
PRINT NAME

of _____ ,
PRINT ADDRESS

authorize the release of my employment driving record including drug test results reported under

ORS 825.410 to _____ ,
PRINT NAME

of _____ .
PRINT ADDRESS

Oregon Driver License Number: _____ Date of Birth: _____

SIGNATURE OF DRIVER

X

DATE