MINNESOTA DEPARTMENT OF PUBLIC SAFETY

DRIVER AND VEHICLE SERVICES

Visit Us: drive.mn.gov

Phone: (651) 296-2940 TTY: (651) 282-6555

Print Form

MULTIPLE RECORD SUPPLEMENT - *Attach DVS Records Request (PS2502A)*

1. Driver's License Number..... ☐ - ☐☐☐ - ☐☐☐ - ☐☐☐ - ☐☐☐

   Subject's Name: _____ Date of Birth: _____
   First Middle Last Month / Day / Year

   Plate Number..... ☐☐☐☐☐☐☐☐☐

   Vehicle Identification Number..... ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

2. Driver's License Number..... ☐ - ☐☐☐ - ☐☐☐ - ☐☐☐ - ☐☐☐

   Subject's Name: _____ Date of Birth: _____
   First Middle Last Month / Day / Year

   Plate Number..... ☐☐☐☐☐☐☐☐☐

   Vehicle Identification Number..... ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

3. Driver's License Number..... ☐ - ☐☐☐ - ☐☐☐ - ☐☐☐ - ☐☐☐

   Subject's Name: _____ Date of Birth: _____
   First Middle Last Month / Day / Year

   Plate Number..... ☐☐☐☐☐☐☐☐☐

   Vehicle Identification Number..... ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

4. Driver's License Number..... ☐ - ☐☐☐ - ☐☐☐ - ☐☐☐ - ☐☐☐

   Subject's Name: _____ Date of Birth: _____
   First Middle Last Month / Day / Year

   Plate Number..... ☐☐☐☐☐☐☐☐☐

   Vehicle Identification Number..... ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

5. Driver's License Number..... ☐ - ☐☐☐ - ☐☐☐ - ☐☐☐ - ☐☐☐

   Subject's Name: _____ Date of Birth: _____
   First Middle Last Month / Day / Year

   Plate Number..... ☐☐☐☐☐☐☐☐☐

   Vehicle Identification Number..... ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

6. Driver's License Number..... ☐ - ☐☐☐ - ☐☐☐ - ☐☐☐ - ☐☐☐

   Subject's Name: _____ Date of Birth: _____
   First Middle Last Month / Day / Year

   Plate Number..... ☐☐☐☐☐☐☐☐☐

   Vehicle Identification Number..... ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

7. Driver's License Number..... ☐ - ☐☐☐ - ☐☐☐ - ☐☐☐ - ☐☐☐

   Subject's Name: _____ Date of Birth: _____
   First Middle Last Month / Day / Year

   Plate Number..... ☐☐☐☐☐☐☐☐☐

   Vehicle Identification Number..... ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐