



Please complete the appropriate portions below to change your name and/or address. Attach required documents, sign and forward to the board office at the address listed above.

NAME (as it appears on current license) Courtne L. Gelle Norman
ADDRESS 2330 Washington St., Kansas City, MO 64114
EMAIL CourtneLNorman@hotmail.com

DATE OF BIRTH 09/02/1973 SOCIAL SECURITY # 493-88-3315
LICENSE NUMBER 69816 PHONE NUMBER (913) 220-8490

NAME CHANGE	Sex	State	Year
Attach a copy of the legal name change documentation (marriage license, divorce decree, etc.)			

ADDRESS CHANGE
NEW ADDRESS <u>2330 Washington St., Kansas City, MO 64114</u>
DATE CHANGE TAKES EFFECT <u>05/04</u>

ATTESTATION:
(I declare under penalty of perjury under the laws of the State of Kansas that the information provided on this form is true and correct to the best of my knowledge.)

CourtneLNorman 6-10-13

Use the Duplicate Registration License Form to request a new license with the updated information.



Missouri Department of Revenue
Driver License Bureau
**TEMPORARY
DRIVER LICENSE**

EXPIRATION DATE

07/11/2013



VALID FOR USE WHILE OPERATING A MOTOR VEHICLE

- This document becomes invalid and should be destroyed once you have received your permanent card or on the expiration date stated above, whichever occurs first.
- If this document is lost, stolen, or destroyed, the applicable duplicate license replacement and processing fees will be charged.
- If you do not receive your permanent card in the mail in 30 days, you may call (673) 753-2730 for assistance.
- If your driving privilege becomes suspended, revoked, disqualified, or cancelled, this document is no longer valid.
- Your license will be mailed in an unmarked envelope. **IT WILL NOT BE FORWARDED.**

ATTENTION: Your license will be mailed to
COURTNE LYNELLE NORMAN
8020 WASHINGTON ST
KANSAS CITY, MO 64114



DRIVER LICENSE

CLASS	F		DUI/D EXPIRATION	09/09/2018
LICENSE NUMBER	S203263034			
NORMAN				
COURTNE LYNELLE				
8020 WASHINGTON ST				
KANSAS CITY, MO 64114				
ENDORSEMENTS	NONE			
RESTRICTIONS	NONE			
SEX	F	WGT	115 LBS	ISSUE DATE 09/11/2013
HGT	5'05"	EYES	BLUE	
131251620024				

RESTRICTIONS

FOR OFFICE USE ONLY

DOCUMENT CODE	ISSUE CODE	PROCESS CODE	SEQUENTIAL NUMBER
01 LICENSE	03 DUPLICATE	01 REGULAR	131251620024
TRANSACTION FEE	PROCESSING FEE	ORDIN DONATION	BLIND DONATION
\$7.50	\$5.00	\$0.00	\$0.00
SKILLS TEST	TA	2nd	3rd
ISSUE DATE	CLIENT	NOTIFIED BY CLERK	OFFICE NUMBER
06/11/2013	DF2408		125011
			EXAM NUMBER