

NEW JERSEY  **MVC**
New Jersey Motor Vehicle Commission

AUTO DRIVER LICENSE

Letricia J. Floyd
Acting Chief Administrator

NOT FOR "REAL ID" PURPOSES

DL **H4237 03567 11732** CLASS **D**
DOB **11-01-1973**
ISS **06-23-2023** EXP **11-01-2027**

HIGGINS
ALVIN G
3 LAWN SIDE DR
LAWRENCEVILLE, NJ 08648-3737

END NONE
RESTR NONE

GENDER M **HGT 6'-07"** **EYES BRN**
SC **BB202317400000198** **RENC 24.00**



LIFE DX
VERIFY™

AMP CPT MET OPI PCP

Interpret Results Neg(-) Pos(+) Invalid
C=Control T=Test
100730Mile Rev A

1000002323

PATIENT NAME
Alvin Higgins

D.O.B.
11/01/1973

Date & Time of Collection
10/09/23 12:31pm

V20230127