



LIFE DX
VERIFY™



0000000392

V20230127



PATIENT NAME

Ivan Cortes Muñoz

D.O.B.

06/06/1995

Date & Time of Collection

07/07/23 10:46:11

Interpret Results

C=Control T=Test

Y00730LifeRevA

Neg(-) Pos(+) Invalid

C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
T	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

California

USA

DRIVER LICENSE

FEDERAL
LIMITS
APPLY



DL Y6161511

EXP 08/26/2023

LN CORTES MUNOZ

FN IVAN

707 BAY ST
SUISUN CITY, CA 94585

DOB 06/06/1995

RSTR NONE

CLASS C

END NONE

06061995

06061995

SEX: M HAIR BLK
HGT 5'-04" WGT 180 lb

EYES BRN

ISS

02/23/2022

DD 01/31/2022 62109/BBFD/26