



0000000582

PATIENT NAME
James Schubik

D.O.B.
5/19/89

Date & Time of Collection
6/12/23 9:50

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

AUTO DRIVER LICENSE

NOT FOR "REAL ID" PURPOSES

[Signature]
Chief Administrator

DL **S1537 38375 05894** CLASS **D**
DOB **05-19-1989**
ISS **10-12-2021** EXP **05-19-2025**

SCHUBIN
JAMES N
650 KLOCKNER ROAD
HAMILTON, NJ 08619-2910
END **NONE**
RESTR **NONE**

James N. Schubik

GENDER **M** HGT **5'-10"** EYES **BLU** ORGAN DONOR
WV WV202128500000392 REN 24.00