

 **LIFE DX**
VERIFY™

AMP
COC
MET
OPI
PCP

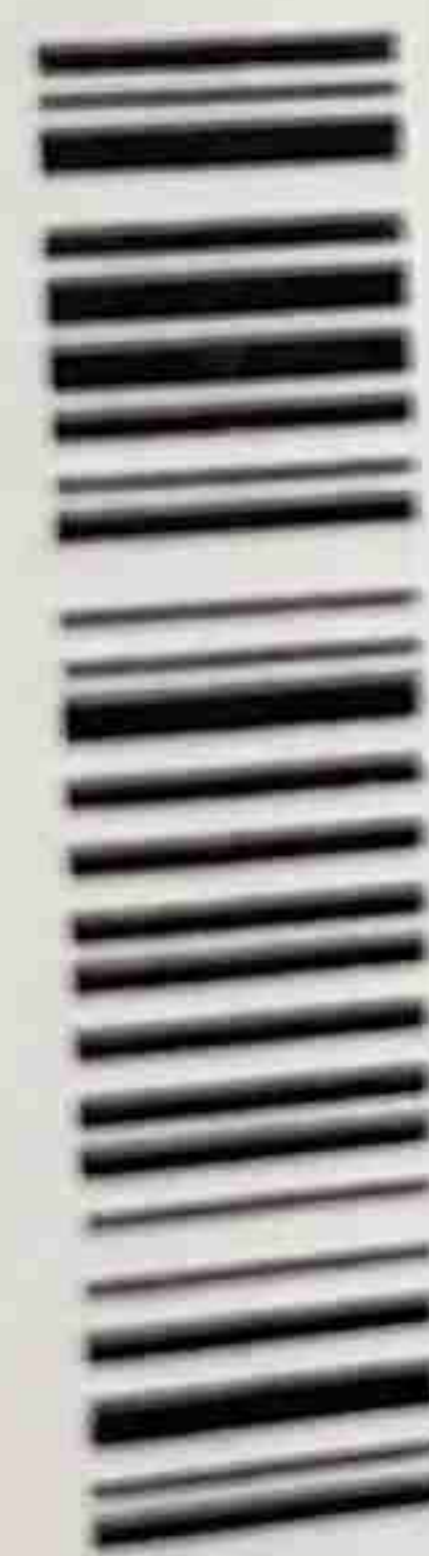
Interpret Results

C=Control T=Test
100730Mlife Rev A

Neg(-) Pos(+) Invalid

C	—	—	—	—
T	—	—	—	—

1000002273



V20230127

PATIENT NAME

Alivia

Rivera

D.O.B.

3-21-1993

Date & Time of Collection

11-6-23

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

PROBATIONARY AUTO LICENSE

NOT FOR "REAL ID" PURPOSES


Acting Chief Administrator



DL **R4752 02674 53932** CLASS **D**
DOB **03-21-1993**
ISS **06-01-2023** EXP **03-21-2027**



RIVERA
ALIVIA MARIE
156 HAMILTON AVE
TRENTON, NJ 08609-2704

END **NONE**
RESTR **1 T**

GENDER **F** HGT **5'-03"** EYES **BRN**
SS **BB202315200000167** UCU- **6.00**

