



V20230127 1000002754

PATIENT NAME
RILEY
ROBINSON

D.O.B.
5/11/95

Date & Time of Collection
11/3/2023

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

	Neg(-)	Pos(+)	Invalid
C			
T			

NEW JERSEY MVC
New Jersey Motor Vehicle Commission

AUTO DRIVER LICENSE

NOT FOR "REAL ID" PURPOSES

DL **R6022 65700 05952** CLASS D
DOB **05-11-1995**
ISS **01-03-2022** EXP **05-11-2025**

ROBINSON RILEY
417 LEFFERTS STREET
SOUTH AMBOY, NJ 08879-1514
END NONE
RESTR 1

VETERAN

GENDER M HGT 5'-11" EYES BRN
WX WX202200300001433 DUP02 11.00