



LIFE DX
VERIFY™

AMP
COC
MET
OPT
PCP

Interpret Results
C=Control T=Test
100% Sensitivity

Neg(-) Pos(+) Invalid

☒ ☒ ☒ ☒ ☒

00000000585
LZ10EZ02A

PATIENT NAME
SAVION HICKS
D.O.B.
3/21/02
Date & Time of Collection
11:00am 6/11/2

NEW JERSEY MVC
New Jersey Motor Vehicle Commission

AUTO DRIVER LICENSE
DL H4112 69382 03022 CLASS D

Savion Hicks
Acting Chief Administrator

UNDER 21 UNTIL 03-21-2023

NOT FOR "REAL ID" PURPOSES
DOB 03-21-2002
ISS 03-07-2023
EXP 03-21-2027

END NONE
RESTR 1
HICKS
SAVION SEAN
121 ROBERTS AVENUE
HAMILTON, NJ 08609-1715
GENDER M HGT 5'11" EYES BRN REN
RP RP202306662616201 0.00

Savion S. Hicks