



1000002296
PATIENT NAME
Chrichele Wilson
D.O.B.
07/27/1998
Date & Time of Collection
11/17/23

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

PROBATIONARY AUTO LICENSE
NOT FOR "REAL ID" PURPOSES

[Signature]
Chief Administrator

DL **W4395 12475 57982** CLASS **D**
DOB **07-27-1998**
ISS **08-17-2021** EXP **07-27-2025**

WILSON
CHRICHELLE N
1216 CALHOUN STREET
TRENTON, NJ 08638-4016

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

GENDER **F** HGT **5'-08"** EYES **BRN**
WX **WX202122900000292** DUP01 11.00

