



**LIFE DX**  
VERIFY™

AMP  
MD  
COC  
MET  
OPI  
PCP

**Interpret Results**  
C=Control T=Test  
100730Mlife Rev A

Neg(-) Pos(+) Invalid

C	—	—	—
T	—	—	—

1000002322

V20230127



PATIENT NAME

Ashley Osorio

D.O.B.

9/20/95

Date & Time of Collection

11/3/23

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

**AUTO DRIVER LICENSE**

NOT FOR "REAL ID" PURPOSES

*Loretta J. Hays*  
Acting Chief Administrator

DL **08052 06300 59952** CLASS **D**

DOB **09-20-1995**

ISS **09-25-2023**

EXP **09-20-2026**

**OSORIO-DELEON**  
**ASHLEY**

**436 EAST FRANKLIN ST**  
**HAMILTON, NJ 08610-5312**

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

GENDER **F** HGT **5'-05"** EYES **BRN**  
WX **WX202326800002127** DUP01 **11.00**

