



**LIFE DX**  
VERIFY™

MP AMP  
COC  
MET  
OPI  
PCP

**Interpret Results**

C=Control T=Test  
100730Mlife Rev A

Neg(-) Pos(+) Invalid

C	—	—	—	—
T	—	—	—	—

V20230127

1000001774



PATIENT NAME

JOHN  
CARLUCCI

D.O.B.

3/10/1965

Date & Time of Collection

9/25/2023

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

**AUTO DRIVER LICENSE**

NOT FOR "REAL ID" PURPOSES



DL **C0629 40700 03652** CLASS D  
DOB **03-10-1965**  
ISS **06-23-2021** EXP **03-10-2025**

CARLUCCI 3RD  
JOHN  
51 NORWALK AVE  
WHITING, NJ 08759-2232  
END NONE  
RESTR NONE



GENDER **M** HGT **5'-09"** EYES **BRN**  
REN **24.00**  
RP202117454384101