



V20230127 1000001765

PATIENT NAME
**ANDRE
WATSON**

D.O.B.
1/28/1988

Date & Time of Collection
9/25/2023

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

C	—	—	—	—
T	—	—	—	—

Connecticut **DRIVER LICENSE** USA

Antonio "Tony" Sharma
COMMISSIONER

DL

4d LIC # **138565044**
3 DOB **01/28/1988**
4b EXP **01/28/2028**

4a ISS **03/28/2023** 15 SEX **M**
16 HGT **6'-00"** 18 EYES **BRO**
5 DD **23032812530701MZZA**

9 CLASS **D**
9a END **NONE**
12 REST **NONE**

WATSON
ANDRE J
274 MAIN ST
EAST HARTFORD, CT 06118-1824

DONOR