



0000000796
V20230427
PATIENT NAME *Hartsfield*
Kimberly
D.O.B. *06/18/1964*
Date & Time of Collection *6/12/23 1:20pm*

NEW JERSEY NJMVC
New Jersey Motor Vehicle Commission

AUTO DRIVER LICENSE
NOT FOR "REAL ID" PURPOSES

Letricia Little-Hayes
Acting Chief Administrator

DL **H0701 43579 56642** CLASS D
DOB **06-18-1964**
ISS **05-01-2023** EXP **06-18-2027**

HARTSFIELD
KIMBERLY R
20B MALLARD ST
MANCHESTER, NJ 08753-5110
END NONE
RESTR 1

K.R. Hartsfield

GENDER **F** HGT **5'-09"** EYES **BRN**
WV **WV202312100002295** REN **0.00**

