

Interpret Results

C=Control T=Test
100730Mlife Rev A

Neg(-) Pos(+) Invalid

C	+	+	+	+
T	+	+	+	+

0000000741

V20230127



PATIENT NAME

Lacey Moore

D.O.B.

07.15.2000

Date & Time of Collection

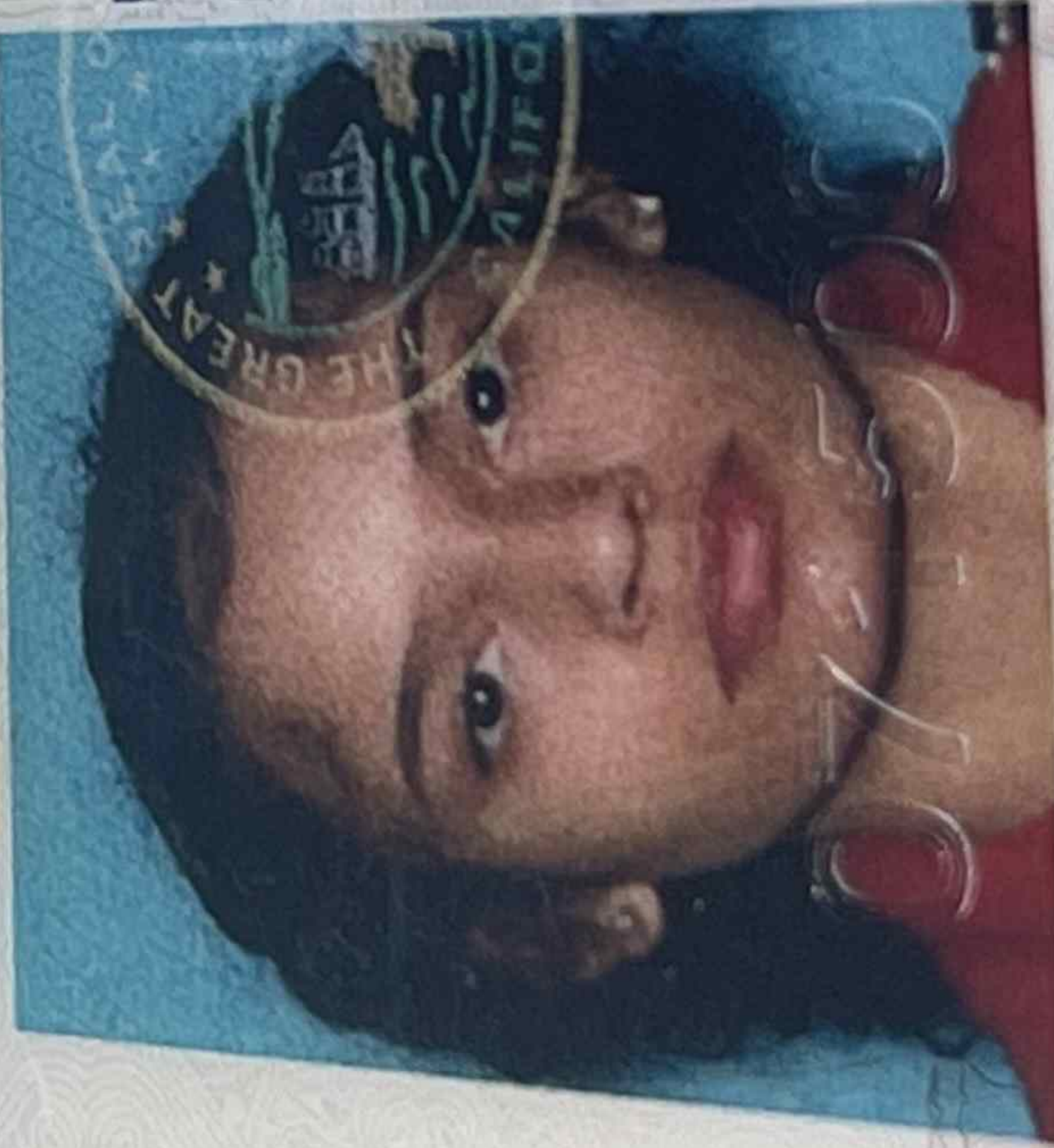
07.05.23 10:41 AM



California

USA

DRIVER LICENSE



DL **Y9198999**
EXP **07/15/2023**

LN **MOORE**
FN **LACEY MICHELLE**
2065 W EL CAMINO AVE 555
SACRAMENTO, CA 95833

DOB **07/15/2000**
RSTR **NONE**

DONOR

SEX **F**
HGT **5'-06"**

HAIR **BRN**
WGT **122 lb**

EYES **BRN**

DD **01/11/2019** 588OD/DDFD/23

07152000

ISS

07/29/20



CLASS **C**

END **NONE**

