

02/07/1978
Rev 12/02/2011
ENDORSEMENTS:
None



CLASS: D Vehicles <26,000 (Operator)

RESTRICTIONS: None

ORGAN DONOR ☐ I hereby certify that I am 18 or older, of sound mind, and upon my death, wish to make an anatomical gift noted here: ☐ Any Organ/Tissue ☐ Entire Body

Donor Signature _____ Date _____ Blood Type _____
☐ Specific Organ(s)/Tissue _____ RH Factor _____

FOR NON-PHOTO
SIGN HERE: _____

DRIVER LICENSE

USA TN

Tennessee
THE VOLUNTEER STATE

DUP

NOT FOR REAL ID ACT PURPOSES

DL NO. 086996911 DOB 02/07/1979

EXP 02/05/2027 ISS 10/19/2023

CLASS D END NONE

REST NONE

SEX F HGT 5'-04" EYES BRO

DD 1012310191406783

WALLS
ANN LEY ANN

APT 2
BARTLETT, TN 38002

Handwritten signature

SOCIAL SECURITY

THE UNITED STATES OF AMERICA SOCIAL SECURITY ADMINISTRATION

TH [REDACTED] FOR

[REDACTED]