



July 29, 2019 7:11 PM

Confirmation Number: 0-643-091-968

Dear LESLIE VONGPHAKDY,

Thank you for applying for your Massachusetts Identification Card. **In order to complete this transaction, you must visit an RMV Service Center.** Listed below is a summary of the information you entered. If this information is not correct, please notify us during your visit to an RMV Service Center.

Name:	LESLIE VONGPHAKDY
Date of Birth:	7/2/1997
Residential Address:	800 PARKER ST APT 2 ROXBURY MA 02120-3022
Registering to Vote?:	NO
Gender:	FEMALE
Eye Color:	BROWN
Height:	5 FT 4IN
Military:	N/A
Registering as an Organ and Tissue Donor?:	YES
Applying for a Real Credential?:	NO
Total Due:	\$25.00

I affirm under the penalties of perjury that the information provided is true and accurate. I further understand that providing false statements or information is punishable and subject to both imprisonment and a civil driver's license suspension pursuant to M.G.L. c.90, §24B.

Applicant Signature _____ Applicant SSN _____ Date _____

Thank you for choosing mass.gov/rmv as your Service Center of choice.
Keep up to date with RMV updates by following us at [www.twitter.com/massrmv](https://twitter.com/massrmv)

Clerk Initials _____ Date _____



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