

**MINNESOTA**  
**ENHANCED DRIVER'S LICENSE**

**GAYLE ELIZABETH SAMPLE**  
**123 MAIN STREET**  
**MINNEAPOLIS, MN 12345-0000**

Date of Birth **05-22-1958**

Sex	Eyes	Glass
F	BLU	D

Height Weight **DONOR** **M**

5-08 150

ISSUED 11-2012 EXPIRES 05-22-2016

*Gayle Sample*

**D616603235374**

What is her last name?

What is her middle name?

What is her first name?

What is her birthday?

What is her zip code?

What state does she live in?

What city does she live in?

What is her street address?

What color are her eyes?

What is her weight?

## WRITE

What is her last name?

What is her city?

What is her zip code?

What is her street address?

What is her weight?