

DRIVER HISTORY REPORT

CALIFORNIA DEPARTMENT OF MOTOR VEHICLES

CUSTOMER RECEIPT COPY

DRIVER LICENSE/IDENTIFICATION CARD

INFORMATION REQUEST

05/29/2024

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DATE:05-29-24*TIME:11:39*

DL/NO:D3332055*

B/D:12-11-1984*NAME:BARRIENTOS,FELIX GEOVANY*

RES ADD AS OF 03-08-23:2448 E 126TH ST APT 101, COMPTON 90222*

OTH ADD AS OF 11-17-22:2448 E 126TH ST 101, LOS ANGELES*

IDENTIFYING INFORMATION:

SEX:MALE*HAIR:BLACK*EYES:BRN*HT:5-08*WT:280*

ID CARD MLD:09-10-12* EXP:12-11-17*

LIC/ISS:03-08-23* EXP:12-11-27*CLASS:A COMMERCIAL*

ENDORSEMENTS:

DOUBLES/TRIPLES*

MEDICAL EXPIRES:10-11-25*

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MEDICAL CERTIFICATE INFORMATION:

ISSUE DATE: 10-11-23 EXPIRATION DATE: 10-11-25

STATUS CODE: C

MED EXAMINER NUMBER: CA G53444

MED REGISTRY NUMBER: [3071424317](#)

SPECIALTY: MD MED EXAMINER PHONE NUMBER: [3106315655](tel:3106315655)

MED EXAMINER NAME:

LAST NAME: OKPARA

FIRST NAME: DOUGLAS

MED CERT RESTRICTIONS: NONE

SPE EFF DATE: NONE

DRIVER WAIVER TYPE: NONE

SELF CERTIFICATION INFORMATION:

SELF CERTIFICATION CODE: NI

COMMERCIAL LICENSE STATUS:

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VALID*

LICENSE STATUS:

VALID*

DEPARTMENTAL ACTIONS:

NONE*

CONVICTIONS:

NONE*

FAILURES TO APPEAR:

NONE*

ACCIDENTS:

NONE*

END