

DRIVER LICENSE  
REGULAR

USA  
WISCONSIN



4d M313-7808-1289-03 9 CLASS D

1 MADIVADA  
2 SREEDHAR

8 5218 BROOKSIDE DR # 213  
MADISON, WI 53718

LIMITED TERM

15 SEX M 16 HGT 5'-10"  
17 WGT 174 lb 18 EYES BLK

19 HAIR BLK 4a ISS 07/07/2020

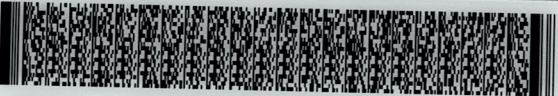
3 DOB 08/09/1981 4b EXP 06/15/2023

9a END NONE 5 DD OTDML2020070714095405

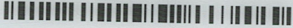
Donor  
Sticker  
Here

AUG 81





48798-171-710  
ME01 UMB DML

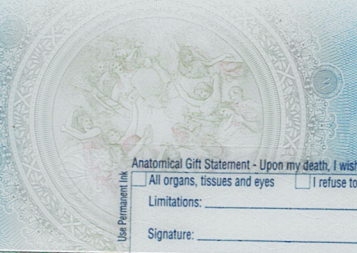


01302 001869163 41



08091981

[wisconsin.dmv.gov](http://wisconsin.dmv.gov)



Anatomical Gift Statement - Upon my death, I wish to donate: §1.0  
 All organs, tissues and eyes     I refuse to make an anatomical gift  
 Limitations: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Use Permanent Ink