



CALIFORNIA DEPARTMENT OF MOTOR VEHICLES

*****CUSTOMER RECEIPT COPY*****

DRIVER LICENSE/IDENTIFICATION CARD

INFORMATION REQUEST

05/05/2026

"

DATE:05-05-26*TIME:17:22*

DL/NO:Y6179557*

B/D:08-01-1986*NAME:CHAHAL,MANJINDER SINGH*

IDENTIFYING INFORMATION:

SEX:MALE*HAIR:BLACK*EYES:BLK*HT:6-00*WT:200*

ID CARD MLD:07-29-22* EXP:06-21-24*

LIC/ISS:07-31-25* EXP:08-01-29*CLASS:A COMMERCIAL*

ENDORSEMENTS:

NONE*

MEDICAL EXPIRES:04-07-27*

MEDICAL CERTIFICATE INFORMATION:

ISSUE DATE: 04-07-25 EXPIRATION DATE: 04-07-27

"

STATUS CODE: C

MED EXAMINER NUMBER: CA 11166

MED REGISTRY NUMBER: 9048406030

SPECIALTY: AN MED EXAMINER PHONE NUMBER: 9164541423

MED EXAMINER NAME:

LAST NAME: BUTLER

FIRST NAME: KIMBERLY

MED CERT RESTRICTIONS: NONE

SPE EFF DATE: NONE

DRIVER WAIVER TYPE: NONE

SELF CERTIFICATION INFORMATION:

SELF CERTIFICATION CODE: NI



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RESTRICTIONS:

E-CLASS A/B-LIMITED TO VEHICLE WITH AUTOMATIC TRANSMISSION*

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COMMERCIAL LICENSE STATUS:

VALID*

LICENSE STATUS:

VALID*

DEPARTMENTAL ACTIONS:

NONE*

CONVICTIONS:

VIOL/DT CONV/DT SEC/VIOL DKT/NO DISP COURT VEH/LIC

06-18-24 09-30-24 01 NEV

UPDATED:10-02-24*

03-02-25 06-02-25 22406A VC 0616417 31455 ZP02339

COMVEH OTH

UPDATED:06-18-25*

"

09-19-25 12-11-25 22348C VC IN01919 15110 ZP64374

40508A VC

COMVEH OTH

UPDATED:12-12-25*

01-23-26 02-24-26 BP OREG

UPDATED:03-02-26*



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FAILURES TO APPEAR:

VIOL/DT SEC/VIOL DKT/NO COURT VEH/LIC

03-30-26 78 26T0003 OREG

UPDATED:04-20-26*

ACCIDENTS:

"

NONE*

END