

# MEDICAL MARIJUANA USE REGISTRY Identification Card



**Patient**

**Patient ID #: P5HT5974**

**LEMME**

**JOSEPH M**

**7248 VIA LURIA**

**LAKE WORTH, FL 33467**

**DOB: 07/21/1948**

**Caregiver(s):**

**EXP: 05/30/2025**

**Card ID #: D8KU-T32P-7E55**

