

## NORTH DAKOTA MEDICAL MARIJUANA



PATIENT  
NAME: Sample  
DATE OF ISSUE: printed  
DATE OF EXPIRATION: 10-17-2018  
ID NUMBER: 8R87UBP5T5  
DRIED LEAVES AND FLOWER: NO



NORTH DAKOTA  
DEPARTMENT of HEALTH  
*Division of Medical Marijuana*

# SAMPLE

## NORTH DAKOTA MEDICAL MARIJUANA

## PATIENT

If found or to verify card, contact the Division of Medical Marijuana at (701) 328-1311.

Counterfeiting, replicating, alteration or misuse of this card is prohibited by law. Use or possession of this card by any person other than the intended cardholder is unlawful.



8 R 8 7 U B P 5 T 5



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