

**OA LOGISTICS**  
SERVICES, INC.

**MOBILE EQUIPMENT  
OPERATOR CERTIFICATE**

MOBILE EQUIPMENT TYPE(S)    TRAINER/EVALUATOR    DATE OF ISSUE  
Valid at OA Logistics ONLY

This certificate confirms that  
**OPERATOR'S NAME**  
Quiana Smith  
Has successfully fulfilled all the theoretical and practical training and evaluation requirements listed in federal and regional regulations and hereby authorized to operate the type(s) of mobile equipment listed on the reverse.

MOBILE EQUIPMENT TYPE(S)	TRAINER/EVALUATOR	DATE OF ISSUE
OP	Jimmy Farmer	30-Nov-22
EPJ	Jimmy Farmer	4-Jan-23

**OPERATOR NUMBER**    **DATE ISSUED**    **EXPIRE DATE**  
30-Nov-22    30-Nov-25

**TRAINER NAME**    **TRAINER CERT NO.**    **TRAINER SIGNATURE**  
Jimmy Farmer       Jimmy Farmer

**EMPLOYER NAME**    **AUTHORIZING PERSON**    **EMPLOYER SIGNATURE**  
OA Logistics    Edward Maxwell    Edward Maxwell

REFER TO THIS OPERATOR'S CERTIFICATE FOLDER FOR COMPLETE DETAILS ON TRAINING & EVALUATION (INCLUDING MORE SPECIFICS ON EQUIPMENT ATTACHMENTS)