

MOBILE EQUIPMENT OPERATOR CERTIFICATE

MOBILE EQUIPMENT TYPE(S)
Valid at SHIP8 ONLY

TRAINER/EVALUATOR

DATE OF ISSUE

This certificate confirms that:

OPERATOR'S NAME: **Stephano Johnson** OPERATOR'S SIGNATURE: *[Signature]*
 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.

EXPIRE DATE	03/22/2023
TRAINER/EVALUATOR SIGNATURE	<i>[Signature]</i>
EMPLOYER NAME	SHIP8
TRAINER/EVALUATOR NAME	Edward Maxwell
EMPLOYER SIGNATURE	<i>[Signature]</i>
AUTHORIZING PERSON	Edward Maxwell

MOBILE EQUIPMENT TYPE(S)	TRAINER/EVALUATOR	DATE OF ISSUE
FL	Jimmy Farmer	03/22/2023
CL	Jimmy Farmer	03/22/2023
OP	Jimmy Farmer	03/22/2023
RT	Jimmy Farmer	03/22/2023
EPJ	Jimmy Farmer	03/22/2023
TSP	Jimmy Farmer	03/22/2023

REFER TO THIS OPERATOR'S CERTIFICATE HOLDER FOR COMPLETE DETAILS ON TRAINING EVALUATION INCLUDING MORE SPECIFICS ON EQUIPMENT'S ATTACHMENTS.