

MOBILE EQUIPMENT OPERATOR CERTIFICATE

This certificate confirms that:

OPERATOR'S NAME Sheronda George **EVALUATOR'S SIGNATURE** *[Signature]*
 Has successfully fulfilled all the theoretical and practical training and evaluation required and listed in federal and regional regulations and hereby authorized to operate the type(s) of mobile equipment listed on the reverse.

EXPIRE DATE 9/29/2023

EXPIRE DATE 9/29/2026

OPERATOR'S NAME Jimmy Farmer **EVALUATOR'S SIGNATURE** *[Signature]*
SHIP8 **SHIPP8** **AUTHORIZING PERSON** Edward Maxwell *[Signature]*

Valid at SHIPP8 ONLY

MOBILE EQUIPMENT TYPE(S)	TRAINER/EVALUATOR	DATE OF ISSUE
OP	Jimmy Farmer	29-Sep-23
EPJ	Jimmy Farmer	29-Sep-23

REFER TO THIS OPERATOR'S CERTIFICATION FOLDER FOR COMPLETE DETAILS ON TRAINING & EVALUATION INCLUDING MOBILE SPEC FICS ON EQUIPMENT & ATTACHMENTS