



**MOBILE EQUIPMENT OPERATOR CERTIFICATE**

This certificate confirms that

OPERATORS NAME  
T/tyre Latson

OPERATORS SIGNATURE  
*[Signature]*

Has successfully fulfilled all the theoretical and practical training and evaluation requirements listed in federal and regional regulations and is hereby authorized to operate the type(s) of mobile equipment listed on the reverse

CERTIFICATION DATE  
8/13/2025

DATE ISSUED  
9/26/2025

DATE EXPIRES  
8/13/2028

TRAINER NAME  
Jimmy Farmer

TRAINER SIGNATURE  
*[Signature]*

EMPLOYER NAME  
SHIP8, INC

AUTHORIZING PERSON  
Edward Maxwell

EMPLOYER SIGNATURE  
*[Signature]*

**Valid at SHIP8 INC.**

MOBILE EQUIPMENT TYPE(S)

TRAINER NAME

DATE OF ISSUE

OP

Jimmy Farmer

9/26/2025

RT

Jimmy Farmer

8/13/2025

EPJ

Jimmy Farmer

9/26/2025

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

IF YOU BELIEVE YOUR CERTIFICATION IS INCORRECT, SEE SAFETY TEAM