

**Riki Transportation Inc dba BRZ
8225 Leclair Ave
Burbank, IL 60459**

December 21, 2023

RE: Employee Verification Requests for Eduardo Fernandez Proenza from Rincon Trucking.

To whom it may concern:

As of November 21, 2023 I have made the following attempts to contact Rincon Trucking in order to verify Eduardo Fernandez Proenza's employment there.

The first attempt was made on December 11, 2023 when I sent a request at info@rincontrucking.com which was recommended by safety person when I reached out through phone to their office.

On December 15, 2023 I re-sent request completing the second attempt and on December 19, 2023 I have made a third and final attempt. A formal response from Rincon Trucking was never received.

Sincerely,

Diana Baranda

A handwritten signature in black ink, appearing to be 'D. Baranda', with a stylized flourish at the end.



Employment Verifications <ev@rtbrz.com>

Employment Verification for Eduardo Fernandez Proenza

Employment Verifications <ev@rtbrz.com>

Tue, Dec 19, 2023 at 12:57 PM

To: info@rincontrucking.com

Hello,

I am a safety officer from Riki Transportation BRZ Company.
I am sending you this email to confirm Eduardo Fernandez Proenza's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

Kind regards,

Sofia

[HR Department](#)

[Riki Transportation Inc dba BRZ](#)

MC#086875

8225 Leclair Ave,

Burbank, IL 60459

Phone Number: 630-566-2119

Email: ev@rtbrz.com

**EV EduardoFernandezProenza-3.pdf**

168K



Employment Verifications <ev@rtbrz.com>

Employment Verification for Eduardo Fernandez Proenza

Employment Verifications <ev@rtbrz.com>

Fri, Dec 15, 2023 at 3:51 PM

To: info@rincontrucking.com

Hello,

I am a safety officer from Riki Transportation BRZ Company.
I am sending you this email to confirm Eduardo Fernandez Proenza's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

Kind regards,

Sofia

[HR Department](#)

[Riki Transportation Inc dba BRZ](#)

MC#086875

8225 Leclair Ave,

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**EV EduardoFernandezProenza-3.pdf**

168K



Employment Verifications <ev@rtbrz.com>

Employment Verification for Eduardo Fernandez Proenza

1 message

Employment Verifications <ev@rtbrz.com>
To: info@rincontrucking.com

Mon, Dec 11, 2023 at 11:57 PM

Hello,

I am a safety officer from Riki Transportation BRZ Company.
I am sending you this email to confirm Eduardo Fernandez Proenza's employment with your company.
Please find the attached form, and send it back to me at your earliest convenience.
Thank you!

Kind regards,

Sofia

[HR Department](#)

[Riki Transportation Inc dba BRZ](#)

MC#086875

8225 Leclair Ave,

Burbank, IL 60459

Phone Number: 630-566-2119

Email: ev@rtbrz.com

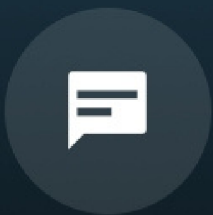


EV EduardoFernandezProenza-3.pdf

168K



(713) 855-6378



12.20.23.

Outgoing call

12:11 (51 sec)

From

(630) 566-2119 (me)

(713) 855-6378

Phone number



Create new contact



Add to existing contact

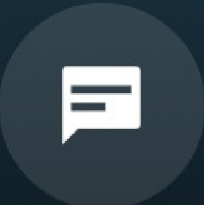


Block and report





(713) 855-6378



12.15.23.

Outgoing call

13:46 (42 sec)

From

(630) 566-2119 (me)

(713) 855-6378

Phone number



Create new contact



Add to existing contact



Block and report





(713) 855-6378






12.13.23.

Outgoing call
14:49 (42 sec)

From
(630) 566-2119 (me)

(713) 855-6378
Phone number



- Create new contact
- Add to existing contact
- Block and report



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SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: RINCON TRUCKING**Phone:** (713)855-6378**Date:** 11/21/23**Address:** 8725 FM 362, Brookshire, TX 77423**Fax:**

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness(including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company(their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.

Eduardo Fernandez Proenza (Nov 21, 2023 12:18 CST)

Safety Manager (Dec 4, 2023 09:20 CST)

Applicant's Signature

Company representative

Dear Personnel Manager

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

PLEASE BE ADVISED! You may reply by FAX +1 630 485 6980 or e-mail: safety@rtbrz.com.

Name of Applicant: Eduardo Fernandez Proenza SSN: 720741581**Job Applying For:** OTR Driver

Did the Applicant work for you as a driver: Yes No

If No, please explain: _____

If employed as a driver, please answer the following: Start Date : _____ End Date : _____

☐ Company Driver ☐ Owner/Operator ☐ Other? _____

Type of tractor operated: _____ Type of trailer pulled: _____

Other equipment operated: _____ Commodities operated: _____

Accidents: ☐ Yes ☐ No If yes, please give the date and brief description of each accident: _____Traffic Violations: ☐ Yes ☐ No If yes, please list all including the date and type of violation: _____**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**Alcohol tests with a result of 0.04 or greater? ☐ Yes ☐ No If yes, please give date: _____Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: _____Refusals to be tested? ☐ Yes ☐ No If yes, please give date: _____Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: _____

Any problems with bonding? Yes No If yes, please explain: _____

Why did this employee leave your company? _____

Would you re-employee this person? ☐ Yes ☐ No If no, please explain: _____

Additional comments: (Any problems with customer relations, supervision, or abuse of equipment? _____

Name/Title (of person providing the above information): _____

Company: _____

Date: _____

[Print](#)[Set This Request Complete](#)**Request / Response Report**

Response Tracking ID: (None)

Request #: 44866796

Dali Transportation LLC dba Prime One

Provided By: **Cayla Liles**
Title: **(N/A)**
Address: **5105 Tollview Drive**
City / State / Zip: **Rolling Meadows, IL 60008**
Email: **safety@callprimeone.com**
Phone: **708-787-8080**
Fax:
Items Requested: **EMP**

[Questions about this report?](#)**Requested Subject Information**Denotes a value not equal to the Provided value**Eduardo Fernandez Proenza**

SSN: **xxx-xx-1581**
DOB: **05-29-1979**

Date Range Requested: **02-2022 to 12-2022****Provided Subject Information**Denotes a value not equal to original Requested value**Eduardo Fernandez Proenza**

SSN: **xxx-xx-1581**
DOB: **05-29-1979**

Date Range Provided: **02-2022 to 11-2022****Original Request Information****Provided Information**

Position Held
Reason For Leaving
Driver Class
Driver Type
Was the driver Terminated?
Was the driver subject to FMCSRs while employed?
Was the driver's job designated as a safety sensitive function in DOT regulated mode subject to Drug and Alcohol testing per 49 CFR Part 40?
Areas Driven
Equipment Driven
Trailer Driven
Loads Hauled

Position Held	Driver
Reason For Leaving	Quit
Driver Class	Company
Driver Type	Team
Was the driver Terminated?	No
Eligible for Rehire?	Review
Was the driver subject to FMCSRs while employed?	Yes
Was the driver's job designated as a safety sensitive function in DOT regulated mode subject to Drug and Alcohol testing per 49 CFR Part 40?	Yes
Full Time / Part Time	Full
Areas Driven	OTR
Equipment Driven	Tractor-Trailer
Trailer Driven	Van
Loads Hauled	FAK
Miles per week	2500
Number of States Driven	All
Trailer Length	53

Activity Log

12-18-2023 02:39 PM - Cayla Liles (Dali Transportation LLC dba Prime One)

Response added. Request #44866796 status set to "Submitted".

12-15-2023 04:45 PM - Zigi Stamenkovic

Request sent under order #19165878 via **Network** method.

Tenstreet, 120 W. 3rd Street Tulsa, OK 74103.

Drivers: for questions about this report, contact the Tenstreet Consumer Service Department at 877-219-9283, Option 1, then 1 or email:
drivers@tenstreet.com



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SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: PRIME ONE (USDOT 2399080)**Phone:** (708) 787-8080**Date:** 11/21/23**Address:** 5105 TOLLVIEW DR SUITE 255 ROLLING MEADOWS, IL 60008 **Fax:**

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness(including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company(their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.

Eduardo Fernandez Proenza (Nov 21, 2023 12:18 CST)
Safety Manager (Dec 4, 2023 09:20 CST)

Applicant's Signature

Company representative

Dear Personnel Manager

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

PLEASE BE ADVISED! You may reply by FAX +1 630 485 6980 or e-mail: safety@rtbrz.com.

Name of Applicant: Eduardo Fernandez Proenza SSN: 720741581**Job Applying For:** OTR Driver

Did the Applicant work for you as a driver: Yes No

If No, please explain: _____

If employed as a driver, please answer the following: Start Date : _____ End Date : _____

☐ Company Driver ☐ Owner/Operator ☐ Other? _____

Type of tractor operated: _____ Type of trailer pulled: _____

Other equipment operated: _____ Commodities operated: _____

Accidents: ☐ Yes ☐ No If yes, please give the date and brief description of each accident: _____Traffic Violations: ☐ Yes ☐ No If yes, please list all including the date and type of violation: _____**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**Alcohol tests with a result of 0.04 or greater? ☐ Yes ☐ No If yes, please give date: _____Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: _____Refusals to be tested? ☐ Yes ☐ No If yes, please give date: _____Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: _____

Any problems with bonding? Yes No If yes, please explain: _____

Why did this employee leave your company? _____

Would you re-employee this person? ☐ Yes ☐ No If no, please explain: _____

Additional comments: (Any problems with customer relations, supervision, or abuse of equipment? _____

Name/Title (of person providing the above information): _____

Company: _____

Date: _____



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SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: ROYAL 3 INC (USDOT 2828543)**Phone:** (630) 485-7370**Date:** 11/21/23**Address:** 6850 W 63RD STREET CHICAGO, IL 60638**Fax:**

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness(including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company(their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.


Eduardo Fernandez Proenza (Nov 21, 2023 12:18 CST)
Safety Manager (Dec 4, 2023 09:20 CST)

Applicant's Signature

Company representative

Dear Personnel Manager

The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employer. Will you kindly reply to this inquiry respecting this applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.

PLEASE BE ADVISED! You may reply by FAX +1 630 485 6980 or e-mail: safety@rtbrz.com.

Name of Applicant: Eduardo Fernandez Proenza SSN: 720741581

Job Applying For: OTR Driver

Did the Applicant work for you as a driver: ☒ Yes ☐ No

If No, please explain: _____

If employed as a driver, please answer the following: Start Date : 09/28/2021 End Date : 12/27/2021☒ Company Driver ☐ Owner/Operator ☐ Other? _____Type of tractor operated: Semi truck Type of trailer pulled: Dry VanOther equipment operated: N/A Commodities operated: General freightAccidents: ☐ Yes ☒ No If yes, please give the date and brief description of each accident: _____Traffic Violations: ☐ Yes ☒ No If yes, please list all including the date and type of violation: _____**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**Alcohol tests with a result of 0.04 or greater? ☐ Yes ☒ No If yes, please give date: _____Verified positive controlled substances test results? ☐ Yes ☒ No If yes, please give date: _____Refusals to be tested? ☐ Yes ☒ No If yes, please give date: _____Rehab completed under direction of SAP/MRO? ☐ Yes ☒ No If yes, please give date: _____Any problems with bonding? Yes ☒ No If yes, please explain: _____Why did this employee leave your company? +30 days vacationWould you re-employee this person? ☒ Yes ☐ No If no, please explain: _____

Additional comments: (Any problems with customer relations, supervision, or abuse of equipment? _____)

Name/Title (of person providing the above information): Mateja MarkovicCompany: Royal 3Date: 12/04/2023



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SAFETY PERFORMANCE HISTORY
RECORDS REQUEST

- CONFIDENTIAL -

Company: ROYAL 3 INC (USDOT 2828543)**Phone:** (630) 485-7370**Date:** 11/21/23**Address:** 6850 W 63RD STREET CHICAGO, IL 60638**Fax:**

I hereby authorize this company to release all records of employment, including assessments of my job previous ability, and fitness(including dates of any and all alcohol or drug tests, those confirmed results, and/or my refusing to any alcohol or drug tests and any rehabilitation completion under direction of SAP/MRO) to each and every company(their authorized agents) which may request such information in connection with my application for employment company, I hereby release this company, and its employees, officers, directors, and agents from any and all liable type as a result of providing the following information to the below mentioned person and/or company.


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Applicant's Signature

Company representative

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PLEASE BE ADVISED! You may reply by FAX +1 630 485 6980 or e-mail: safety@rtbrz.com.

Name of Applicant: Eduardo Fernandez Proenza SSN: 720741581**Job Applying For:** OTR Driver

Did the Applicant work for you as a driver: Yes No

If No, please explain: _____

If employed as a driver, please answer the following: Start Date : _____ End Date : _____

☐ Company Driver ☐ Owner/Operator ☐ Other? _____

Type of tractor operated: _____ Type of trailer pulled: _____

Other equipment operated: _____ Commodities operated: _____

Accidents: ☐ Yes ☐ No If yes, please give the date and brief description of each accident: _____Traffic Violations: ☐ Yes ☐ No If yes, please list all including the date and type of violation: _____**INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATION**Alcohol tests with a result of 0.04 or greater? ☐ Yes ☐ No If yes, please give date: _____Verified positive controlled substances test results? ☐ Yes ☐ No If yes, please give date: _____Refusals to be tested? ☐ Yes ☐ No If yes, please give date: _____Rehab completed under direction of SAP/MRO? ☐ Yes ☐ No If yes, please give date: _____

Any problems with bonding? Yes No If yes, please explain: _____

Why did this employee leave your company? _____

Would you re-employee this person? ☐ Yes ☐ No If no, please explain: _____

Additional comments: (Any problems with customer relations, supervision, or abuse of equipment? _____

Name/Title (of person providing the above information): _____

Company: _____

Date: _____