# Riki Transportation Inc dba BRZ 8225 Leclaire Ave Burbank, IL 60459

December 22, 2023

RE: Employee Verification Requests for Armando Pestana Llanes from A & L TRUCKING OF PALM BEACH LLC.

To whom it may concern:

As of November 22, 2023 I have made the following attempts to contact A & L TRUCKING OF PALM BEACH LLC in order to verify Armando Pestana Llanes's employment there.

The first attempt was made on November 29, 2023 when I sent a request at <u>TRUCKINGOFPALMBEACH@gmail.com</u> which was recommended by safety person when I reached out through phone to their office.

On December 5, 2023 I re-sent request completing the second attempt and on December 12, 2023 I have made a third and final attempt. A formal response from A & L TRUCKING OF PALM BEACH LLC was never received.

Sincerely,

Kristina Milacic

he



#### Employment Verifications <ev@rtbrz.com> To: TRUCKINGOFPALMBEACH@gmail.com

Tue, Dec 12, 2023 at 1:54 PM

Hello,

I am a safety officer from Riki Transportation BRZ Company. I am sending you this email to confirm Armando Pestana Llanes'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 Kind regards, Sofia <u>HR Department</u> <u>Riki Transportation Inc dba BRZ</u> MC#086875 8225 Leclaire Ave, Burbank, IL 60459 Phone Number: 630-566-2119 Email: <u>ev@rtbrz.com</u>

03DQ BRZ\_Armando Pestana Llanes 1 (1)-3.pdf 819K



#### Employment Verifications <ev@rtbrz.com> To: TRUCKINGOFPALMBEACH@gmail.com

Tue, Dec 5, 2023 at 9:47 PM

Hello,

I am a safety officer from Riki Transportation BRZ Company. I am sending you this email to confirm Armando Pestana Llanes'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 Kind regards, Sofia <u>HR Department</u> <u>Riki Transportation Inc dba BRZ</u> MC#086875 8225 Leclaire Ave, Burbank, IL 60459 Phone Number: 630-566-2119 Email: <u>ev@rtbrz.com</u>

03DQ BRZ\_Armando Pestana Llanes 1 (1)-3.pdf 819K



#### Employment Verifications <ev@rtbrz.com> To: TRUCKINGOFPALMBEACH@gmail.com

Wed, Nov 29, 2023 at 2:17 PM

Hello,

I am a safety officer from Riki Transportation BRZ Company. I am sending you this email to confirm Armando Pestana Llanes'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 Kind regards, Sofia <u>HR Department</u> <u>Riki Transportation Inc dba BRZ</u> MC#086875 8225 Leclaire Ave, Burbank, IL 60459 Phone Number: 630-566-2119 Email: <u>ev@rtbrz.com</u>

BI9K







1 Company: A & L TRUCKING OF PALM BEACH LLC (DOT:3121089) Phone: 567 Address: 1378 EDEN RD WEST PALM BEACH, FL 33417 Fax: L barshou authorize this company to release all seconds of employment including	SAFETY PERFORMANCE HISTORY RECORDS REQUEST - CONFIDENTIAL -
Address: 1378 EDEN RD WEST PALM BEACH, FL 33417 Fax:	-
Address: 1378 EDEN RD WEST PALM BEACH, FL 33417 Fax:	- CONFIDENTIAL -
Address: 1378 EDEN RD WEST PALM BEACH, FL 33417 Fax:	
	1 460 5029 Date: 11/22/23
I hereby authorize this company to release all records of employment, including dates of any and all alcohol or drug tests, those confirmed results, and/or my recompletion under direction of SAP/MRO) to each and every company( their auth connection with my application for employment company, I hereby release this from any and all liable type as a result of providing the following information to	efusing to any alcohol or drug tests and any rehabilitation horized agents) which may request such information in company, and its employees, officers, directors, and agents
Armando Pestana (Nov 22, 2023 14:04 EST)	Safety BRZ (Nov 22, 2023 14:06 EST)
Applicant's Signature C	ompany representative
Dear Personnel Manager The person named herein has applied to this company for employmen applicant as a past employer. Will you kindly reply to this inquiry resp above, all liability of you and your company has been released by the <u>PLEASE BE ADVISED!</u> You may reply by FAX +1 630 485 6980 or e-ma	ecting this applicant. As you will read waiver stated applicant.
Name of Applicant: Armando Pestana Llanes SSN: 772184656	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	n 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 INFORMATI	ION
Alcohol tests with a result of 0.04 or greater?	please give date:
Verified positive controlled substances test results? Yes No If yes,	please give date:
Refusals to be tested?	please give date:
Rehab completed under direction of SAP/MRO?	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 a	abuse of equipment?
Name/Title (of person providing the above information): Company:	
Date:	

# Riki Transportation Inc dba BRZ 8225 Leclaire Ave Burbank, IL 60459

December 22, 2023

RE: Employee Verification Requests for Armando Pestana Llanes from M & D AUTO TRANSPORT INC.

To whom it may concern:

As of November 22, 2023 I have made the following attempts to contact M & D AUTO TRANSPORT INC in order to verify Armando Pestana Llanes's employment there.

The first attempt was made on November 29, 2023 when I sent a request at <u>OMARRENE02@yahoo.com</u> which was recommended by safety person when I reached out through phone to their office.

On December 5, 2023 I re-sent request completing the second attempt and on December 12, 2023 I have made a third and final attempt. A formal response from M & D AUTO TRANSPORT INC was never received.

Sincerely,

Kristina Milacic

her



Employment Verifications <ev@rtbrz.com> To: OMARRENE02@yahoo.com Tue, Dec 12, 2023 at 1:55 PM

Hello,

I am a safety officer from Riki Transportation BRZ Company. I am sending you this email to confirm Armando Pestana Llanes'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 Kind regards, Sofia <u>HR Department</u> <u>Riki Transportation Inc dba BRZ</u> MC#086875 8225 Leclaire Ave, Burbank, IL 60459 Phone Number: 630-566-2119 Email: <u>ev@rtbrz.com</u>

B3DQ BRZ\_Armando Pestana Llanes 1 (1)-4.pdf



Employment Verifications <ev@rtbrz.com> To: OMARRENE02@yahoo.com Tue, Dec 5, 2023 at 9:46 PM

Hello,

I am a safety officer from Riki Transportation BRZ Company. I am sending you this email to confirm Armando Pestana Llanes'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 Kind regards, Sofia <u>HR Department</u> <u>Riki Transportation Inc dba BRZ</u> MC#086875 8225 Leclaire Ave, Burbank, IL 60459 Phone Number: 630-566-2119 Email: <u>ev@rtbrz.com</u>

B 03DQ BRZ\_Armando Pestana Llanes 1 (1)-4.pdf



Employment Verifications <ev@rtbrz.com> To: OMARRENE02@yahoo.com

Wed, Nov 29, 2023 at 2:20 PM

Hello.

I am a safety officer from Riki Transportation BRZ Company. I am sending you this email to confirm Armando Pestana Llanes'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 Kind regards, Sofia HR Department Riki Transportation Inc dba BRZ MC#086875 8225 Leclaire Ave, Burbank, IL 60459 Phone Number: 630-566-2119 Email: ev@rtbrz.com

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03DQ BRZ\_Armando Pestana Llanes 1 (1)-4.pdf







Company: M & DAUTO TRANSPORTING       Phone: 786 405-2465       Date: 11/22/23         Middess: 12200 SW 1915T ST MIAMI, FL 33177       Fax:       Discrete provide the set show company to release all records of employment, including assessments of my job previous abilitation completion under direction of SAP/MRO) to each and every company (their authorized agents) which may request such and are released to my and all abolt of or upy tests, those company. It hereby release this company, and its employees, offices, directors, and agents from any and all label type as a result of providing the following information to the below mentioned person and/or company.         Applicant's Signature       Company representative         Corre PersonnelMaager       Company representative         Corre PersonnelMaager       Company has been released by the applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.         Places: EADVISED! You may reply by FAX + L 630 485 6980 or e-mail: safety/sensitive position, Your finding the above, all liability of you and your company has been released by the applicant.         Places: EADVISED! You may reply by FAX + L 630 485 6980 or e-mail: safety/sensitive position, Your finding the above, all liability of you and your company has been released by the applicant.         Places: EADVISED! You may reply by FAX + L 630 485 6980 or e-mail: safety/sensitive position, Your finding the above information in company has been released by the applicant.         Places: explain:       You and your company has been released by the applicant.         Places: explain:       Armando Pestana Llane		2 SAFE	
Company: M & DAUTO TRANSPORTING       Phone: 786 405-2465       Date: 11/22/23         Middess: 12200 SW 1915T ST MIAMI, FL 33177       Fax:       Discrete provide the set show company to release all records of employment, including assessments of my job previous abilitation completion under direction of SAP/MRO) to each and every company (their authorized agents) which may request such and are released to my and all abolt of or upy tests, those company. It hereby release this company, and its employees, offices, directors, and agents from any and all label type as a result of providing the following information to the below mentioned person and/or company.         Applicant's Signature       Company representative         Corre PersonnelMaager       Company representative         Corre PersonnelMaager       Company has been released by the applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant.         Places: EADVISED! You may reply by FAX + L 630 485 6980 or e-mail: safety/sensitive position, Your finding the above, all liability of you and your company has been released by the applicant.         Places: EADVISED! You may reply by FAX + L 630 485 6980 or e-mail: safety/sensitive position, Your finding the above, all liability of you and your company has been released by the applicant.         Places: EADVISED! You may reply by FAX + L 630 485 6980 or e-mail: safety/sensitive position, Your finding the above information in company has been released by the applicant.         Places: explain:       You and your company has been released by the applicant.         Places: explain:       Armando Pestana Llane			- CONFIDENTIAL -
Address:       12200 SW 191ST ST MIAMI, FL 33177       Fax:       Fa			CONTIDENTIAL
I hereby authorize this company to release all records of employment, including assessments of my job previous statist, and fitness (including dates of any and all alcohol of wing tests, thes confirmed results, and/or my refusite to any action of rung tests and any rehabilitation completion under direction of SAP/MRO) to each and every company (their authorized agents) which may requests and any rehabilitation completion under direction of SAP/MRO) to each and every company (their authorized agents) which may requests and any rehabilitation completion under direction of SAP/MRO) to each and every company (their authorized agents) which may requests and any rehabilitation completion under direction of SAP/MRO) to each and every company (their authorized agents) which may requests and any rehabilitation completion under direction of SAP/MRO) to each and every company (their authorized agents) which may requests and any rehabilitation completion under direction of SAP/MRO) to each and every company (their authorized agents) which may requests and any rehabilitation completions are previously and the set of the some and the set of the some and/or company may may all allohold of the some and the set of the some and	1 /		5 <b>Date:</b> 11/22/23
dates of any and all alcohol or drug tests, those confirmed results, and/or my rifusing to any alcohol or drug tests and any rehabilitation competion under direction of SAY/MRO to each and every company (their authorized agents) with humar request such information in connection with my application for employment company. In thereby release this company, and its employees, officers, directors, and agents from any and all labels type as a result of providing the following information to the below mentioned person and/or company. Applicant's Signature Company representative 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. Bay past employer, will you kindly creptly 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. Manager For: OTR Driver Differs, directors, and agents for a company is a driver, pelse to this company is safety-sensitive position, Your finding the above, all liability of you and your company has been released by the applicant. Manager for: OTR Driver Differs, driver, please explain: The person named herein has a driver, pelses as site of the applicant as a driver, pelses as a driver, please as set the following: Start Date :			ts of my job previous ability and fitness( including
Applicant's Signature       Company representative         Dear Person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant. <i>PLEASE BE ADVISED!</i> You may reply by FAX + 1 630 485 6980 or e-mail: safety@rtbrz.com.         Name of Applicant:       Armando Pestana Llanes         SSW: 772184656       Job Applying For: OTR Driver         Did the Applicant work for you as a driver:       Yes       No         If No, please explain:	dates of any and all alcohol or drug tests, those confirmed result completion under direction of SAP/MRO) to each and every com connection with my application for employment company, I here	ts, and/or my refusing to a pany( their authorized agen by release this company, a	ny alcohol or drug tests and any rehabilitation nts) which may request such information in nd its employees, officers, directors, and agents
Applicant's Signature       Company representative         Dear Person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant. <i>PLEASE BE ADVISED!</i> You may reply by FAX + 1 630 485 6980 or e-mail: safety@rtbrz.com.         Name of Applicant:       Armando Pestana Llanes         SSW: 772184656       Job Applying For: OTR Driver         Did the Applicant work for you as a driver:       Yes       No         If No, please explain:	AGW	R	~~~
Dear Person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant. As you will read waiver stated above, all liability of you and your company has been released by the applicant. <i>PLEASE BE ADVISED!</i> You may reply by FAX +1 630 485 6980 or e-mail: safety@rtbrz.com. <i>Name of Applicant:</i> Armando Pestana Llanes       ssiv: 772184656       Job Applying For: OTR Driver         Did the Applicant work for you as a driver:       Yes       No       If No, please explain:	Armando Pestana (Nov 22, 2023 14:04 EST)	Safety BRZ (Nov	22, 2023 14:06 EST)
The person named herein has applied to this company for employment in a safety-sensitive position, Your finding the applicant as a past employmer, Will you kindly reply to this inquiry respecting this applicant. <i>By EASE BE ADVISED!</i> You may reply by FAX + 1 630 485 6980 or e-mail: safety@rtbrz.com.          Name of Applicant:       Armando Pestana Llanes       SSW: 772184656       Job Applying For: OTR Driver         Did the Applicant work for you as a driver:       Yes       No       If interpretation in the induiry reply to the applicant.         Provide the applicant work for you as a driver:       Yes       No       If interpretation in the induiry reply to the applicant.         If wo, please explain:	Applicant's Signature	Company rep	resentative
Did the Applicant work for you as a driver:       Yes       No         If No, please explain:	applicant as a past employer. Will you kindly reply to thi above, all liability of you and your company has been rel <u>PLEASE BE ADVISED!</u> You may reply by FAX +1 630 485	s inquiry respecting this eased by the applicant. 6980 or e-mail: safety@	applicant. As you will read waiver stated
If No, please explain:   If employed as a driver, please answer the following:   Start Date :   Company Driver   Owner/Operator   Other?      Type of tractor operated: Type of traiter pulled: Type of tractor operated: Commodities operated: Company: Company: Company: Commodities operated: Commodities operated: Company: Commodities operated: Commodities operated: Commodit		72104030	
Company Driver       Owner/Operator       Other?         Type of tractor operated:       Type of trailer pulled:			
Other equipment 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:         Any problems with bonding?       Yes       No       If yes, please give date:         Why did this employee leave your company?	Type of tractor operated: Type of	trailer pulled:	
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:         Any problems with bonding?       Yes       No       If yes, please give date:         Why did this employee leave your company?	Other equipment operated: Commodi	ities operated:	
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:	Accidents: Yes No If yes, please give the date and	brief description of each a	ccident:
Alcohol tests with a result of 0.04 or greater?       Yes       No       If yes, please give date:	Traffic Violations: Yes No If yes, please list all incl	luding the date and type of	violation:
Verified positive controlled substances test results?       Yes       No       If yes, please give date:	INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES	S INFORMATION	
Refusals to be tested?          Yes         No         If yes, please give date:	Alcohol tests with a result of 0.04 or greater?	No If yes, please give	date:
Rehab completed under direction of SAP/MRO?       Yes       No       If yes, please give date:	Verified positive controlled substances test results?	No If yes, please give	date:
Any problems with bonding? Yes       No       If yes, please explain:         Why did this employee leave your company?	Refusals to be tested?	No If yes, please give	date:
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):	Rehab completed under direction of SAP/MRO?	No If yes, please give	date:
Would you re-employee this person?       Yes       No       If no, please explain:	Any problems with bonding? Yes No If yes, please e	explain:	
Additional comments: ( Any problems with customer relations, supervision, or abuse of equipment?	Why did this employee leave your company?		
Name/Title (of person providing the above information): Company:	Would you re-employee this person? Yes No If no,	please explain:	
Company:	Additional comments: ( Any problems with customer relations, s	supervision, or abuse of equ	ipment?
	Company:		
	Date:		

# Riki Transportation Inc dba BRZ 8225 Leclaire Ave Burbank, IL 60459

December 22, 2023

RE: Employee Verification Requests for Armando Pestana Llanes from ROADTEX SYSTEMS LLC.

To whom it may concern:

As of November 22, 2023 I have made the following attempts to contact ROADTEX SYSTEMS LLC in order to verify Armando Pestana Llanes's employment there.

The first attempt was made on November 29, 2023 when I sent a request at <u>ROADTEXSYSTEMSLLC@gmail.com</u> which was recommended by safety person when I reached out through phone to their office.

On December 5, 2023 I re-sent request completing the second attempt and on December 12, 2023 I have made a third and final attempt. A formal response from ROADTEX SYSTEMS LLC was never received.

Sincerely,

Kristina Milacic

her



#### Employment Verifications <ev@rtbrz.com> To: ROADTEXSYSTEMSLLC@gmail.com

Tue, Dec 12, 2023 at 1:55 PM

Hello,

I am a safety officer from Riki Transportation BRZ Company. I am sending you this email to confirm Armando Pestana Llanes'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 <u>HR Department</u> <u>Riki Transportation Inc dba BRZ</u> MC#086875 8225 Leclaire Ave, Burbank, IL 60459 Phone Number: 630-566-2119 Email: ev@rtbrz.com

**03DQ BRZ\_Armando Pestana Llanes 1 (1)-5.pdf** 821K



#### Employment Verifications <ev@rtbrz.com> To: ROADTEXSYSTEMSLLC@gmail.com

Tue, Dec 5, 2023 at 9:46 PM

Hello,

I am a safety officer from Riki Transportation BRZ Company. I am sending you this email to confirm Armando Pestana Llanes'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 <u>HR Department</u> <u>Riki Transportation Inc dba BRZ</u> MC#086875 8225 Leclaire Ave, Burbank, IL 60459 Phone Number: 630-566-2119 Email: ev@rtbrz.com

**03DQ BRZ\_Armando Pestana Llanes 1 (1)-5.pdf** 821K



#### Employment Verifications <ev@rtbrz.com> To: ROADTEXSYSTEMSLLC@gmail.com

Wed, Nov 29, 2023 at 2:22 PM

Hello,

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

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**03DQ BRZ\_Armando Pestana Llanes 1 (1)-5.pdf** 821K







SR2	3 SAFETY PERFORMANCE H RECORDS REQUES - CONFIDENTIAL	Т -		
Company: ROADTEX SYSTEMS LLC (DOT: 3279195)	<b>Fiblic:</b> 303 975 1470	e: 11/22/23		
Address: 5300 GATEWAY BLVD STE 15 LAKELAND, FL 33811- <sup>-7</sup> I hereby authorize this company to release all records of employ dates of any and all alcohol or drug tests, those confirmed result completion under direction of SAP/MRO) to each and every comp connection with my application for employment company, I herei from any and all liable type as a result of providing the following Armando Pestana (Nov 22, 2023 14:04 EST)	yment, including assessments of my job previous ability, and fitr Its, and/or my refusing to any alcohol or drug tests and any reh- npany( their authorized agents) which may request such informa eby release this company, and its employees, officers, directors,	abilitation ation in		
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. <u>PLEASE BE ADVISED!</u> You may reply by FAX +1 630 485 6980 or e-mail: safety@rtbrz.com.				
Name of Applicant: Armando Pestana Llanes SSN: 7	Job Applying For: OTR Driv	er		
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	f 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	SINFORMATION			
Alcohol tests with a result of 0.04 or greater?	No If yes, please give date:			
Verified positive controlled substances test results? Yes No If yes, please give date:				
Refusals to be tested?				
Rehab completed under direction of SAP/MRO?	No If yes, please give date:			
Any problems with bonding? Yes No If yes, please e	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:	_			

BRZ