

- CONFIDENTIAL -

Company: RAYTCHEV TRANSPORTATION INC (DOT(773) 692-7750) Phone: (773) 692-7750

Date: 02/19/24

Address: 4205 UNITED PKWY SCHILLER PARK, IL 60176 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.

1

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	h
HEPBURN, JERRICK JEROME (Feb 19, 2024 15:15 EST)	Kristina Milacic (Feb 19, 2024 15:21 EST)
Applicant's Signature Co	ompany representative
8YUF DYfgebbY`A UbU[Yf H\Y`dYfgeb bUa YX`\YfY]b`\UgʻUdd`]YX`he`h\]gʻVta dUbmZef`Ya d`ena Yb Udd`]WubhUgʻU'dUghYa d`enYf"'K]``nci`]bX`mfYd`mhe`h\]gʻ]bei]fmfYgd UVej Yž'U```]UV]`]hmeZnci`UbX`nci f`Vta dUbm\UgʻVYYb`fY`YUgYX`Vmh\Y` <u>PLEASE BE ADVISED!</u> 'Nci`a UmfYd`mby FAX +1 630 485 6980 or e-ma	YWgb["h\]g'Udd`]WgbH"5g'nci k]``fYUX kU[j Yf'ghUhYX Udd`]Wgbt"
Name of Applicant: HEPBURN, JERRICK JEROME SSN: 264372274	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 :11/09/22	+ 03/31/23 End Date : 12/21/22 + 02/05/24
Type of tractor operated: tractor-trailer Type of trailer pulled:	
Other equipment operated: Commodities operated: _	
Accidents: \checkmark Yes \square No If yes, please give the date and brief description 12/16/22 - driver went into the ditch stuck in snow and almost f	
Traffic Violations: Yes Yo If yes, please list all including the date	and type of violation:
INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATI	ON
Alcohol tests with a result of 0.04 or greater? \Box Yes $$ No If yes,	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:	upon review
Additional comments: (Any problems with customer relations, supervision, or a	buse of equipment?
Name/Title (of person providing the above information): Noah, Safety , 2	/28/24
Company:	
Date:	



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HEPBURN, JERRICK JEROME (Feb 19, 2024 15:15 EST)
Kristina Milacic (Feb 19, 2024 15:21 EST)

Applicant's Signature

Company representative

8YUf DYfgobbY`A UbU[Yf H\Y'dYfgobbV`A UbU[Yf Udd`]YX ho'h\]g'Vta dUbmZof Ya d`ona Ybh]b U'gUZYmigYbg]h]j Y'dog]h]cbžWti f Z]bX]b[`h\ Udd`]WIbhUg'U'dUghYa d`onYf"K]``noi _]bX`mifYd`mho'h\]g']bei]fmifYgdYWIJb[`h\]g'Udd`]WIbh"5gnoi `k]``fYUX k U]j Yf ghUhYX UVcj Yž'U```]UV]`]mmcZnoi `UbX`noi f Vta dUbm\Ug'VYb fY`YUgYX Vmh\Y`Udd`]WIbt" <u>PLEASE BE ADVISED!</u> Noi `a UmfYd`mby FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: HEPBURN, JERRICK JEROME SSN: 264372274

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?
Rehab completed under direction of SAP/MRO?
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						
					Florid	a Rock And Tank Lines
Jerrick Jerome He	pburn	Re-Send F	Request	Dates Re	quested: 1	2-2022 to 06-2023
Status: Submitted	~	Add/Edit			MP	
SSN: 264-37-2274				Date Requested: 02-21-2024		
DOB: 03-19-1977		Log Phone	Attempt	Request	Method: N	letwork
Attempts: 1				Actual Provide	Method: N	I/A
Count towards Exper	ience 🗆	Summ	ary	Next Acti	on Date: 0	2-22-24 Edit Delete
Request #: 4593090	1			-		
Report	Activ	vity Log		Supporting Documents		Print
Request / Respo	nse Report		Res	sponse Tracking ID: (Non	ie)	Request #: 45930901
Florida Rock And Provided By: Title: Address: City / State / Zip: Email: Phone: Fax: Items Requested: Requested Subjet SSN: xxx-xx-2274 DOB: 03-19-1977	Stephanie Crews (N/A) 1801 ART MUSEU Jacksonville, FL 3 larocha@patriottr stcrews@patriottr whoman@patriottr 904-396-5733 904-858-9005 EMP ect Information Hepburn	32207 ans.com rans.com trans.com	1	Denotes a va	lue not equ	ut this report?
Provided Subjec	t Information]	Denotes a value no	t equal to o	original <u>Requested</u> value
Jerrick Hepburn SSN: xxx-xx-2274 DOB: 03-19-1977				Date Range Provi	ded: 12-2 0	023 to 02-2024
Original Reques	t Information			Provided Information		
Position Held				Position Held		Driver
Reason For Leavin				Reason For Leaving		
Driver Class				Driver Class		Company
Driver Type				Driver Type		Solo
Was the driver Tern				Was the driver Terminated	?	
Was the driver subj while employed?	ect to FMCSRs			Termination Reason: Due to company policy, v	we do not	release this
Was the driver's job						
a safety sensitive fu regulated mode sub and Alcohol testing	pject to Drug			Eligible for Rehire? Was the driver subject to F while employed?	MCSRs	Yes
Part 40?				· · · · ·		

Areas Driven	Was the driver's job designated as Yes a safety sensitive function in DOT	
Equipment Driven	_ regulated mode subject to Drug	
Trailer Driven	and Alcohol testing per 49 CFR Part 40?	
Loads Hauled		E. U. Theore
		Full Time
	Areas Driven	Local
	Equipment Driven	Conventional Tractor
	Trailer Driven	Tank Trailer
	Loads Hauled	Hazmat
	Miles per week	
	Number of States Driven	
	Trailer Length	48
Activity Log		
02-22-2024 06:59 AM - Stephanie Crews (Florida Rock & Ta	nk Lines, Inc)	
Response added. Request #45930901 status set to "Subm	itted".	
02-21-2024 03:57 PM - Zigi Stamenkovic		
Request sent under order #19567517 via Network method		
Drivers: for questions about this report, contact the Tenstreet (Street Tulsa, OK 74103. Consumer Service Department at 877- r <u>s@tenstreet.com</u>	219-9283, Option 1, then 1



- CONFIDENTIAL -

Company: FLORIDA ROCK & TANK LINES INC (DOT29628) Phone: (904) 396-5733 Address: 200 WEST FORSYTH 7TH FLOOR JACKSONVILLE, FL 32202 Fax: Date: 02/19/24

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.

2

HEPBURN, JERRICK JEROME (Feb 19, 2024 15:15 EST)	- An
Applicant's Signature	Company representative

Applicance Signature

8YUF DYfgebbY`A UbU[Yf H\Y'dYfgeb bUa YX`\YfY]b`\Ug'Udd`]YX'he'h\]g'Vda dUbmZef Ya d`ena Ybh]b`U'gUZYhn\gYbg]h]j Y'deg]h]cbžWti f`Z]bX]b[`h\Y Udd`]WbhUg'U'dUghYa d`enYf"K]``nœi _]bX`mfYd`mhe'h\]g']bei]fmfYgdYWl[b[`h\]g'Udd`]WbH"5gnœi k]``fYUX'k U[j Yf`ghUhYX UVcj Yž'U```]UV]`]hmeZnœi `UbX'nœi f`Vda dUbm\Ug'VYb'fY`YUgYX Vmh\Y`Udd`]Wbt" <u>PLEASE BE ADVISED!</u> Mei `a UmfYd`mby FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: HEPBURN, JERRICK JEROME SSN: 264372274

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?
Verified positive controlled substances test results? Yes No If yes, please give date:
Refusals to be tested?
Rehab completed under direction of SAP/MRO?
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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- CONFIDENTIAL -

Company: MG LOGISTICS INC (DOT1346846)

Phone: (847) 621-3399

Date: 02/19/24

Address: 10505 DELTA PKWY SCHILLER PARK, IL 60176 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.

3

HEPBURN, JERRICK JEROME (Feb 19, 2024 15:15 EST)	An
Applicant's Signature	Company representative
	Jom Zof Yad`ona Ybh]bUgUZYhn lgYbg]h]jYdog]h]cbžMcifZ]bX]b[`h\Y ro`h\]g`]bei]fmfYgdYWd[b[`h\]g'Udd`]WJbh''5g`nci`k]``fYUXkU]jYfgHUhYX

UVcj YžU```]UV]`]mcZnci UbX nci f Vza dUbm\UgVYYb fY`YUgYX Vmh\Y Udd`]Wbt" <u>PLEASE BE ADVISED!</u> Nci `a UmfYd`mby FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: HEPBURN, JERRICK JEROME SSN: 264372274

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 : End Date :
Company Driver Owner/Operator Other?
Type of tractor operated: <u>Solo, Tractor-Trailer</u> Type of trailer pulled: <u>Van</u>
Other equipment operated: Commodities operated: General freight
Accidents: 🗌 Yes 🗹 No If yes, please give the date and brief description of each accident:
Traffic Violations: \Box Yes \sqrt{N} 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 VNo 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?
Any problems with bonding? Yes <u>No</u> If yes, please explain:
Why did this employee leave your company?
Would you re-employee this person? Yes No If no, please explain: UR
Additional comments: (Any problems with customer relations, supervision, or abuse of equipment?
Name/Title (of person providing the above information): <u>Olesia S., Safety Manager</u> Company: MG Logistics
Date:



- CONFIDENTIAL -

Company: MG LOGISTICS INC (DOT1346846)

Phone: (847) 621-3399

Date: 02/19/24

Address: 10505 DELTA PKWY SCHILLER PARK, IL 60176 Fax:

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<u>PLEASE BE ADVISED</u>! Noi a UmfYd mby FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

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Rehab completed under direction of SAP/MRO?
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:



EV for Hepburn Jerrick Jerome (Tenstreet: dates)

1 message

Crews, Stephanie <Stcrews@patriottrans.com> To: Employment Verifications <ev@royal3inc.com> Wed, Mar 6, 2024 at 1:57 PM

Good Morning,

Mr. Hepburn was employed with Florida Rock and Tank Lines from 12/2023 - 2/2024. Yes, the previous dates that were provided are correct. Please let me know if you have any further questions.

Best Regards,

Stephanie L. Crews Safety Clerk Ph: 904-858-9107 Fax: 904-212-0219 stcrews@patriottrans.com Florida Rock & Tank Lines



From: Employment Verifications <ev@royal3inc.com> Sent: Wednesday, March 6, 2024 5:01 AM To: Crews, Stephanie <<u>Stcrews@patriottrans.com></u> Subject: EV for Hepburn Jerrick Jerome (Tenstreet: dates)

[Quoted text hidden]



Preemployment Hepburn Jerrick

1 message

Noah Voloshyn <noahv@rttrans.us> To: Employment Verifications <ev@rtbrz.com> Cc: Vitaliia Duda <vitaliiad@rttrans.us> Thu, Mar 7, 2024 at 3:06 PM

Hello, as I can see in the system - yes, he used to work w our company 2 times

Thanks,

Noah

From: Employment Verifications <ev@rtbrz.com> Sent: Wednesday, March 6, 2024 3:14 PM To: Noah Voloshyn <noahv@rttrans.us> Cc: Vitaliia Duda <vitaliiad@rttrans.us> Subject: Re: Preemployment Hepburn Jerrick

Hello again,

I just wanted to check with you as we have received confirmation of employment from another company that Mr. Hepburn Jerrick Jerome worked there during the period you stated (their dates: from 12-2023 to 02-2024). We will double-check with them as well.

So, just to confirm, did he work for your company from 11/09/22 to 12/21/22, and from 03/31/23 to 02/05/24?

Thank you!

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

On Wed, Feb 28, 2024 at 10:38 PM Employment Verifications <ev@rtbrz.com> wrote:

Got it, thank you.

Kind regards,

Sofia

phone number of the company (773 692 7750), e-mail: rtsafety@rttrans.us, usdot number: 1622100

Noah Voloshyn

Safety Assistant | RT TRANS

1-773-692-7750 x1055 | noahv@rttrans.us

4205 United Parkway, Schiller Park, IL 60176