

SAFETY PERFORMANCE HISTORY RECORDS REQUEST

- CONFIDENTIAL -

Company: MARATHON XPRESS INC (2157427)

Phone: (305) 381-5155 Fax:

1 A A

Date: 02/14/23

Address: 2621 SW 132ND AVE MIAMI, FL 33175

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

Dayron cespedes (Feb 15, 2023 10:51 CST)	Safety Department (Feb 15, 2023 10:53 CST)
Applicant's Signature	Company representative
8YUf DYfgobbY`A UbU[Yf H\Y'dYfgob bUa YX`\YfY]b`\Ug'Udd`]YX ho h\]g'Wda dUbmZof Ya d`ona Udd`]WIbhUg'U'dUghYa d`onYf"K]``nœi]bX`mfYd`mho h\]g']bei]fmf UVoj Yž'U```]UV]]ImroZnœi 'UbX'nœi f`Vda dUbm\Ug'VYYb fY`YUgYX`Vmi <u>PLEASE BE ADVISED!</u> Nbi 'a UmfYd`mby FAX +1 630 485 6980 or e	fYgdYWn[b[`fk]g'Udd`]Wubh''5g'nci`k]``fYUX`kU[j`Yf`ghUhYX h\Y`Udd`]Wubt''
Name of Applicant: Dayron Cespedes Martinez SSN: 16549458	30 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 : _____ Other? Company Driver Owner/Operator 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: _____ No Rehab completed under direction of SAP/MRO? Yes If yes, please give date: _____ Any problems with bonding? If yes, please explain: Yes No 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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Phone: (305) 381-5155 Fax: Date: 02/14/23

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

Dayron cespedes (Feb 15, 2023 10:51 CST)	afety Department (Feb 15, 2023 10:53 CST)
Applicant's Signature Cor	npany representative
Dear Personnel Manager The person named herein has applied to this company for employment applicant as a past employer. Will you kindly reply to this inquiry respe above, all liability of you and your company has been released by the a <u>PLEASE BE ADVISED!</u> You may reply by FAX +1 630 485 6980 or e-mail	cting this applicant. As you will read waiver stated pplicant.
Name of Applicant: Dayron Cespedes Martinez SSN: 165494580	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 : $\frac{1}{\sqrt{2}}$ Company Driver Owner/Operator Other?	022 End Date : <u>10/1072</u>
Type of tractor operated: Sleeper Type of trailer pulled:	Leefer
Other equipment operated: Commodities operated:	Produce
Accidents: Yes No If yes, please give the date and brief description	of each accident:
Traffic Violations: Yes Yo If yes, please list all including the date a	nd type of violation:
INQUIRY FOR ALCOHOL AND CONTROLLED SUBSTANCES INFORMATIO	N
Alcohol tests with a result of 0.04 or greater?	lease give date:
Verified positive controlled substances test results? Yes If yes, p	lease give date:
Refusals to be tested?	lease give date:
Rehab completed under direction of SAP/MRO?	lease give date:
Any problems with bonding? Yes No If yes, please explain:	· · · · · · · · · · · · · · · · · · ·
Why did this employee leave your company? CESI ONCHON	
Additional comments: (Any problems with customer relations, supervision, or ab	use of equipment? <u>GOOD DRIVEN</u>
Name/Title (of person providing the above information): JUAN SAON2 Company: MCNAHON XPNESS INC. Date:	Human Resources

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

March 13, 2023

RE: Employee Verification Requests for Dayron Cespedes Martinez from Nostromo.

To whom it may concern:

As of February 14, 2023 I have made the following attempts to contact Nostromo in order to verify Dayron Cespedes Martinez's employment there.

The first attempt was made on February 18, 2023 when I sent a request at <u>AGUERRA777@msn.com</u> which was recommended by safety person when I reached out through phone to their office.

On February 24, 2023 I re-sent request completing the second attempt and on March 3, 2023 I have made a third and final attempt. A formal response from Nostromo was never received.

Sincerely,

Mateja Markovic



Employment Verifications <ev@royal3inc.com>

Employment Verification for Dayron Cespedes Martinez

Employment Verifications <ev@royal3inc.com> To: AGUERRA777@msn.com Fri, Mar 3, 2023 at 12:55 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Dayron Cespedes Martinez's employment with your company. Please find the attached form, and send it back to me at your earliest convenience.

Thank you, and have a nice day!

Sofia <u>HR Department</u> <u>Zigi Freight dba Royal 3 Inc.</u> 6850 W. 63rd St. Chicago, IL 60638 p. 630-485-7370 f. 630-485-6980 e. ev@royal3inc.com

03Dq_DayronCespedes-4.pdf 902K



Employment Verifications <ev@royal3inc.com>

Employment Verification for Dayron Cespedes Martinez

Employment Verifications <ev@royal3inc.com> To: AGUERRA777@msn.com Fri, Feb 24, 2023 at 9:17 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Dayron Cespedes Martinez's employment with your company. Please find the attached form, and send it back to me at your earliest convenience.

Thank you, and have a nice day!

Sofia <u>HR Department</u> <u>Zigi Freight dba Royal 3 Inc.</u> 6850 W. 63rd St. Chicago, IL 60638 p. 630-485-7370 f. 630-485-6980 e. ev@royal3inc.com

03Dq_DayronCespedes-4.pdf 902K



Employment Verifications <ev@royal3inc.com>

Employment Verification for Dayron Cespedes Martinez

1 message

Employment Verifications <ev@royal3inc.com> To: AGUERRA777@msn.com Sat, Feb 18, 2023 at 8:37 PM

Hello,

I am a safety officer from Royal3 INC company.

I am sending you this email to confirm Dayron Cespedes Martinez's employment with your company. Please find the attached form, and send it back to me at your earliest convenience.

Thank you, and have a nice day!

Sofia <u>HR Department</u> <u>Zigi Freight dba Royal 3 Inc.</u> 6850 W. 63rd St. Chicago, IL 60638 p. 630-485-7370 f. 630-485-6980 e. ev@royal3inc.com

03Dq_DayronCespedes-4.pdf 902K



SAFETY PERFORMANCE HISTORY RECORDS REQUEST

- CONFIDENTIAL -

Company: Nostromo *Address:*

Phone: 708-380-6369 *Fax:* Date: 02/14/23

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

A DA		
Dayron cespedes (Feb 15, 2023 10:51 CST)	Safety Department (Feb 15, 2023 10:53 CST)	

Applicant's Signature

Company representative

8YUf DYfgebbY`A UbU[Yf H\Y'dYfgebbUa YX`\YfY]b`\Ug'Udd`]YX'he'h\]g'Wda dUbmZef Ya d`ena Ybh]b`U'gUZYmigYbg]hjj Y'deg]hjebžWti f`ZjbX]b[`h\Y Udd`]Wbh'Ug'U'dUghYa d`enYf"K]``nœi _]bX`mfYd`mhe'h\]g'Jbei]fmfYgdYWijb[`h\]g'Udd`]Wbh''5g'nœi 'k]``fYUX'k Ujj Yf`ghUhYX UVcj Yž'U```]UV]`]hmeZnœi 'UbX'nœi f`Wa dUbm\Ug'VYb'fY`YUgYX'Vmh\Y'Udd`]Wbt'' <u>PLEASE BE ADVISED!</u>'Mti 'a UmfYd`mby FAX +1 630 485 6980 or e-mail: safety@royal3inc.com.

Name of Applicant: Dayron Cespedes Martinez SSN: 165494580

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?
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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: