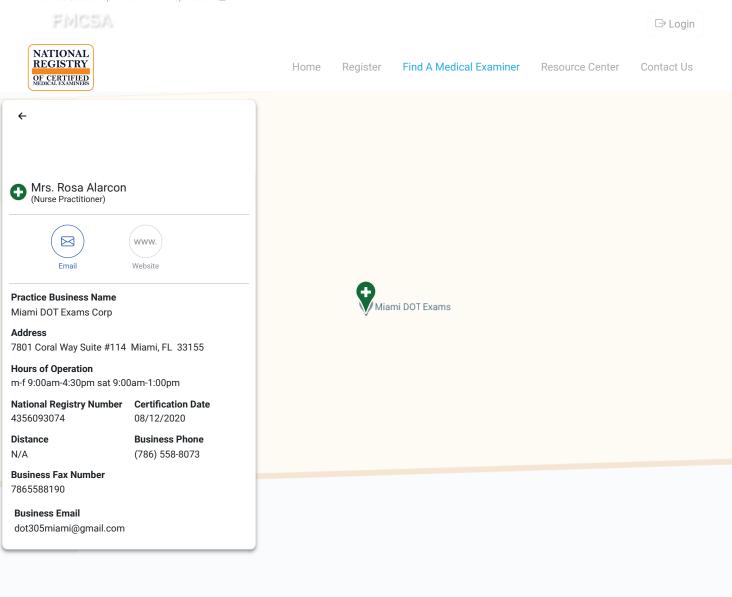
| 5: Department of Transportation obers Mater Carder elerg Administration | | | | • M Subcention subject to the requirements of the Reparately Reduction Act of a callegation of information is estimated to be appreciated with an information are en- terned by an emandatory. Each community can be appreciated with the sector activate method by an end of the sector activate and a sector activate of method by an end of the sector activate activation of the method by a sector activation of the sector activation of the method by a sector activation of the sector activation of the method by a sector activation of the sector activation of the method by a sector activation of the sector activation of the method by a sector activation of the sector activation of the method by a sector activation of the sector activation of th |
|---|---|--|---|--|
| centify that I have examined Last | Name Cardona Blanco | Sector letion | | Coordiance with (please check anly ane): |
| the Federal Motor Carrier Salety) the Federal Motor Carrier Salety ; find this person is qualified, an | r Regulations (52 (CFL321.47.221.42) and, with Regulations (65 (CFL321.47.221.42) with an d. if applicable, only when (check all that apply | th knowledge of the driving du | the the debts as a t | coonsister with (please check anily one): allified, and, if applicable, only when (check all shat apply) OR Massiste operations), and, with knowledge of the chiling dut |
| Wearing corrective lenses | Accompanied by a | without leve | | this an exempt intracity zone (49.528 (29.62) (Federal) |
| Wearing hearing aid | Accompanied by a Sidil Performance 8 | | Cusified : | n aparation o(State) बाह्य क्रिमा State requirements (State) |
| is information i have provided re ICSA-5875, with any attachments, | ganding this physical examination is true and embodies my findings completely and com | d complete. A complete Medic actly, and is on file in my office | al Examination Report For | Medical Examiner's Certificate Expiration Do |
| n a fernan y career an de ante a calence a del ferra de la serve al nas reachades a la calence de ancesa | | | | 83.22.2 |
| | GA. | | under Stelephone Ru 58-8073 | |
| iodical Examiner's Name (picase | print or type) | (786) 5 OMD | taimliner 5 Tolephone Hu 58-8073 OPhysician Assistant | 08/16/2022 Advanced Practice Nurse |
| iodical Busininer's Name (piezze ROSA ALARCON | print or type) | (786)-5 OMD ODO | Departments Tolophone Res 59-8073 O Physician Assistant O Chitopractor | 08/16/2022 Advanced Practice Nurse Other Practicioner (specify) |
| iodical Exeminer's Name (picase ROSA ALARCON edical Exeminer's State Licence | | (786) 5 OMD | Departments Tolophone Res 59-8073 O Physician Assistant O Chitopractor | 08/16/2022 Advanced Practice Nurse |
| iedical Rasminer's Name (piezze ROSA ALARCON edical Examiner's State License PRN9419445 | | (786) 5 OalD Ob0 issuing 50 FL | Departments Tolophone Res 59-8073 O Physician Assistant O Chitopractor | OS/16/2022 CAdvanced Practice Nurse Other Practicioner (specify) National Registry Namber 4356093074 |
| iodical Examiner's Name (piezze ROSA ALARCON iodical Examiner's State License APRN9419445 | | (786) 5 O MD O DO issuing Se EL Debugr's 23 | SS-8073 O Physician Assistant O Chiropractor ste | OS/16/2022 Advanced Practice Nurse Other Practicioner (specify) National Registry Namber |
| Indical Examiner's Signature Indical Examiner's Hame (picase ROSA ALARCON Indical Examiner's State License PRN9419445 | Certificate, or Registration Number | (786) 5 O MD O DO issuing Se EL Debugr's 23 | Selector Selector O'Physician Assistant O'Chiropractor ste | OS/16/2022 CAdvanced Practice Nurse Other Practicioner (specify) National Registry Namber 4356093074 |

United States Department of Transportation 🗹



Google

U.S. DEPARTMENT OF TRANSPORTATION Federal Motor Carrier Safety Administration

1200 NEW JERSEY AVENUE, SE WASHINGTON, DC 20590 855-368-4200

About

- About FMCSA
- Cofoty
- Analysis
- -

News and Events

FMCSA Newsroom

Map data ©2023 Google Report a map error