

Davis Mail Services, Inc.

CERTIFICATE OF DRIVER'S ROAD TEST

(49 CFR 391.31(e)(f)(g))

Driver's Name _____

Social Security Number _____

Operator's or Chauffer's License No. _____

State of License _____

Type of Power unit _____ Type of Trailer(s) _____

If passenger carrier, type of bus _____

This is to certify that the above-named driver
was given a road test under my supervision on

_____ (date) 20__ consisting
of approximately _____ miles of driving.

It is my considered opinion that this driver possesses sufficient driving skill to operate safely
the type of commercial motor vehicle listed above.

(Signature of examiner)

(Title)

Davis Mail Services, Inc. 13464 Grover Rd. Jacksonville, FL 32226
(Organization and Address of Examiner)