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MEDICAL EXAMINER'S CERTIFICATE
(For Commercial Motor Vehicle Operators)

CMV DRIVER CERTIFICATION

Dor Ya

Norley

in accordance with (if not only one)

(Print name)

the Federal Motor Carrier Safety Regulations (49 CFR 391.41, 391.43) and, with knowledge of the following duties, upon the person:

☐ Accomplished by a written/examination (specify type) _____

☐ Accomplished by a Skill Performance Evaluation (SPE) Certificate _____

☐ Driving within an exempt velocity zone ([12 CFR 101.103](#)) (Federal)

Medical Examiner's Certificate Expiration Date

08-15-24

MEDICAL EXAMINER INFORMATION

Medical Examiner's Signature _____

Medical Examiner's Name (please print or type)

DR. JENNY T. LE

Medical Examiner's State License, Certificate, or Registration Number

DC09174TX

Medical Examiner's Telephone Number _____

Date Certificate Signed:

713-213-7803

08.15.22

☐ MD ☐ Physician Assistant ☐ Advanced Practice Nurse
☐ DO ☒ Chiropractor ☐ Other Practitioner (specify)

Trading State

TX

National Registry Number

476257922

EMV DRIVER INFORMATION

Delivery & Support

References

Street Address: 541 NE 131 St

7/7

Driver's License Number

Including State/Province

0614-633-89-339-1

7E

City North Miami

State of Florida

Exp. Order 3316

CLP/CDL

Applicant Number:

2/25/08

Rev. 12/15/77