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					C	aland	or Voor	Covered l	ar thic I	2000	-+·	2022				01	MD M	2105	0520
	mployer: Company Name: Sin	clair Tra	nsnor	tation Cor			ai i eai	Covered	by uns i	кероі	.l	2022		For	m DO	T F 13	MB No 885 (R		
	Doing Business As (1																		
	Address: P.O. Box 3														nders	on@s	incla	iroil.	com
	Name of Certifying (																		
	Telephone: ( <u>801</u> ) <u>4</u>																		
	Prepared by (if differ												hone: ( <u>8</u>	01 ) 503	3-384	5			
	C/TPA Name and Te													01) 503-2					
Cheo ]	ck the DOT agency FMCSA – Motor Ca	for whi arrier: D	ich yo OT #	ou are rep :	orting	g MIS	S data;	and comp Owner-o	olete the operator	e info :: (cir	rmatic cle one	on on that e) YES or	same line NO E	e <b>as appr</b> Exempt (C	<b>opria</b> Circle	ate: One)	YES	or	NO
]	FMCSA – Motor Ca FAA – Aviation: Ce PHMSA – Pipeline:	ertificate	# (if	applicable	e):			·	Pla	an / R	Registra	ition # (if a	pplicable	):				D:	
_X_	PHMSA – Pipeline: FRA – Railroad: To	(Check otal Num	) Gas iber o	Gathering of observed	g Ga l/docu	as Tra mente	ınsmıss ed Part	10n Gas 219 "Rule	G" Ob:	ution <sub>.</sub> servat	Tran tions fo	nsport Haza or covered	ardous Li employee	quids 1 s:	I rans <sub>]</sub>	port C	arboi	1 D10	x1de_
	FRA – Railroad: To USCG – Maritime: FTA – Transit	Vessel I	D#(	USCG- or	State-	-Issue	ed):						(If mo	ore than o	one ve	essel, l	list se	parat	ely.)
	r 1A – Transit Covered Employees:	(A) E1	nter 7	Fotal Nun	ıber S	afety	-Sensit	tive Emplo	yees Iı	All :	Emplo	yee Categ	ories:			73			
( <b>B</b> )	Enter Total Numbe	er of En	nploy	ee Catego	ries:		1												
( <b>C</b> )	Employe Cotton					T-t-1 N-mb-m-f E-m-1				]	If you	u have multi	nle emplos	iee catego	ries c	omplet	te Sec	tions l	
	Employee Category					Total Number of Employees in this Category					and I	I (A) & (B).	Take that	loyee categories, complete Sections I nat filled-in form and make one copy for					
Op/Maint/ER				73					each employee category and complete Sections II (C), III, and IV for each separate employee category.										
III. I	Drug Testing Data									J									
1 2 3				3	4		5	6		7	8	9	10				12	13	
		rest pual	1s 2, 2]		Ö							-		Refusa	1				
		r Of 7	nd 12	ative	tive One		or	or	or		jo,	or			· .	ical	ls To		sults
mbe			Results [Should equal the sum of Columns 2, 3, 9, 10, 11, and 12] Verified Negative Results		Posi - For	sgn	Positive For Marijuana	Positive For Cocaine	ive I		Positive For Opiates	Positive For Amphetamines	Adulterated	pa	dder	Adder Mec tion			d Re
Fotal Number Of Test Results [Should equal the sum of Columns 2.					Verified Positive Results ~ For One Or	More Drugs		Positive I Cocaine	Positive For PCP					Substituted	"Shy Bladder" ~ With No Medical Explanation		Other Refusals To	ting	Cancelled Results
Type of Test $\begin{bmatrix} \ddot{c} & \ddot{c} & \ddot{c} & \ddot{c} \\ \ddot{c} & \ddot{c} & \ddot{c} \\ \ddot{c} & \ddot{c} & \ddot{c} \end{bmatrix}$			Ve <sub>1</sub> Res	Mo							Adı	Sub	ųS,,	Wit	Oth	Tes	Car		
Pre-Employment 1				1															
Random 11																			
Post-Accident		11	11																
Rea	sonable Susp./Cause																		
	urn-to-Duty																		
	•																		
	low-Up																		
	TAL	12		12															
IV. A	Alcohol Testing Dat	ta:		1	2	2		3		4		5	6	7		8		9	
						_		_						Re	efusal	Result	s		
		Total Number Of Screening Test Results [Should equal the sum of Columns 2, 3, 7, and 8]			47.74	with .02		With		sts		Confirmation Tests With Results 0.02 Through 0.039	ssts 14 Or	-	"Shy Lung" ~ With No Medical Explanation			Cancelled Results	
						Screening Tests With Results Below 0.02		rests 2 Or		on Te			on Te	. · · · ·			,		
								ing 7 s 0.00	,	er Of matie	S	matio Resul	matic	r Jung'	NO M	Refu	50	lled l	
	Type of Test	Total Screen Result He sun the		0	Screen		Screening Tests With Results 0.02 Or Greater		Number Of Confirmation Tests Results		Confirmation T With Results 0. Through 0.039	Confirmation Tests With Results 0.04 Or	"Shy Lung"	"Shy Lung" With No Me Explanation		Other Refusals To Submit To Testing			
	Pre-Employment																		
	Random																$\dashv$		$\dashv$
	Post-Accident												1				$\dashv$		$\dashv$
	Reasonable Susp./	Cause																	$\dashv$
	Return-to-Duty														$\dashv$				
	Follow-Up																$\dashv$		$\dashv$
	TOTAL				1								1				$\dashv$		$\dashv$
		1			1		j.		1			1	1				- 1		1