

Form MCSA-5876

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Medical Examiner's Certificate
(For Commercial Driver's License)

I certify that I have examined Last Name: **Gilroy** First Name: **Robert** in accordance with (please check only one):

☒ the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check and apply): OR


☐ the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) with any applicable State variances (which will only be valid for interstate operations), and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check and apply):

☐ Wearing corrective lenses ☐ Accompanied by a ☐ Waiver/exemption ☐ Driving within an exempt intrastate zone (49 CFR 391.62) (Federal)

☐ Wearing hearing aid ☐ Accompanied by a Skill Performance Evaluation (SPE) Certificate ☐ Qualified by operation of 49 CFR 391.65 (Federal)


☐ Grandfathered from State requirements (State)

The information I have provided regarding this physical examination is true and complete. A complete Medical Examination Report Form, MCSA-5875, with any attachments embodies my findings completely and correctly, and is on file in my office.

Medical Examiner's Signature:  Medical Examiner's Telephone Number: **(443) 642-7765** Date of Certificate: **11-22-2021**

Medical Examiner's Name (please print type): **Dr. Eddie Jung** Issuing State: **MD** National Registry Number: **1612342890**

Medical Examiner's State License, Certificate, or Registration Number: **S039357**

Driver's Signature:  Driver's License Number: **G-460-745-237-027** State/Province: **MD**

Driver's Address: **5161 Royal Birkdale Ave, Waldorf, MD 20602** Zip Code: **20602** Yes ☐ No ☐

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MVA

MARYLAND DEPARTMENT
OF TRANSPORTATION

MOTOR VEHICLE
ADMINISTRATION

Maryland
Vehicle Administration
6601 Ritchie Highway N.E.
Glen Burnie, MD 21062

1-800-950-1MVA (1682)
CUSTOMER SERVICE CENTER

1-800-492-4575 (TTY)
<http://www.mva.maryland.gov/>
WEB SITE

INTERIM DOCUMENT

This interim document expires on: 12/31/2021

Product: Commercial - Driver License
Type: New
DL/ID: G460745237027
ROBERT
Address: EUGENE
3215 FERNDAL AVE
GWYNN OAK, MD 21207

Class: A
Product Issued: 12/1/2021
Product Expires: 1/9/2027
GILROY

Birth Date: 1/9/1976
Sex: M
Height: 6-00
Weight: 237 lbs

Organ Donor: No

Special Code(s): NONE
Restriction(s): NONE

Endorsement(s): N - Tank Vehicles

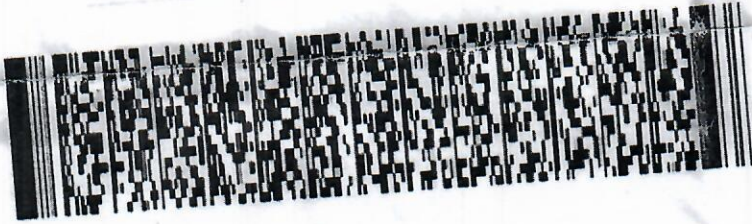
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www.mva.maryland.gov/product-tracking

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Human trafficking is modern day slavery. Traffickers use force, fraud, and coercion to control their victims. For more information visit www.truckersagainstrafficking.org or to report a tip call 1-888-373-7888.



TRANSACTION RECEIPT

Transaction Receipt		Unit Price	Qty	Amount
CDL New from Cancellation - Class		\$9.00	5	\$45.00
CDL Fee (CDLIS)		\$20.00	1	\$20.00
Total Due:				\$65.00
Payment				
Credit Card #: *0000				
Authorization Code: 103948				\$65.00
Total Paid:				\$0.00
Change:				

Transaction Date: 12/1/2021
Branch: Glen Burnie
6601 Ritchie Hwy N
Glen Burnie, MD 21062
Customer Copy
Printed on 12/1/2021 - 1:07:17 PM.
Operator: 12624
Thank You Very Much

ROBERT EUGENE GILROY
DL/ID #: G460745237027

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