

Public Burden Statement

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U.S. Department of Transportation
Federal Motor Carrier
Safety Administration

Medical Examiner's Certificate

(for Commercial Driver Medical Certification)

I certify that I have examined **Last Name:** Gutierrez **First Name:** Sinobio 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 all that 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 intrastate operations), and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check all that apply):

- ☒ Wearing corrective lenses ☐ Accompanied by a _____ waiver/exemption ☐ Driving within an exempt intracity zone ([49 CFR 391.62](#)) (Federal)
☐ Wearing hearing aid ☐ Accompanied by a Skill Performance Evaluation (SPE) Certificate ☐ Qualified by operation of [49 CFR 391.64](#) (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 Certificate Expiration Date

09/25/2022

Medical Examiner's Signature**Medical Examiner's Name (please print or type)**

Jayson Morton

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

13667

Medical Examiner's Telephone Number

(972) 457-0047

Date Certificate Signed

09/25/2021

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

Issuing State

TX

National Registry Number

8769650790

Driver's Signature**Driver's License Number**

12921794

Issuing State/Province

TX

Driver's Address

Street Address: 1818 Young St

City: Dallas

State/Province: TX

Zip Code: 75201

CLP/CDL Applicant/Holder

☒ Yes ☐ No