

**EMPLOYEE LIST**

DUE BY: January 2nd, April 1st, July 1st and/or October 1st

FAX TO: (662) 374-5068

MAIL TO: 805 West Park Ave, Ste 5A, Greenwood, MS 38930 or E-MAIL TO: ahammond@marvellabsllc.com

PHONE NUMBER: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

DOT LIST: \_\_\_\_\_

NON-DOT LIST: \_\_\_\_\_

I CERTIFY THAT THE INFORMATION LISTED BELOW IS THE MOST CURRENT EMPLOYEE LISTING AS OF THIS DATE. BY MY SIGNATURE I ACKNOWLEDGE

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

LAST, FIRST MIDDLE INITIAL	SS#	LOCATION	CDL/PHMSA	TITLE	ANNUAL TESTS REQUIRED?
1					
2					
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