

Auditor Credentials Form

Facility Audited: Freightworks Transportation & Logistics Date: 12/26-27/16

Lead Auditor Credentials

Lead Auditor: Marie K. Dunkle Auditor Certification Number: 505917

Certifying Organization: Name: BEAC Telephone Number: 888-722-2440

Address: 247 Maitland Ave, Altamonte Springs FL 32701 Web Site Address: www.beac.org

Minimum experience: 3 audits in past 7 years as Lead Auditor

Year	Type of Facility, Type of Audit Led	Country & State/Province
2016	Olin/chlorine & KOH production, RC 14001 recertification	USA, Louisiana
2015	Olin/chlorine & KOH production, RC 14001 recertification	USA, Tennessee
2014	SAIA/ chemical transport, RC 14001 recertification	USA, Georgia
2013	Transwood/ bulk chem transport, RCMS recertification	USA, Nebraska

Cyanide-related Operations Experience

Each auditor must have at least 3 years; at least one auditor must have at least 7 years experience

Auditor	Yrs.	Relevant Position Titles	Types of Operations
Marie Dunkle	1991 - 2016	Senior Consultant, head Auditor, Trainer	Safety & Environmental Svcs for Chemical, mining & Nuclear
Marie Dunkle	2013 - 2014	Lead Auditor for Cyanide Audits	Dupont - Manuf., LSI-pkgng Sentinel - Transport
Marie Dunkle	1994 - 2015	Sr. Safety and Emergency Mgt. Consultant	U.S. Dept of Energy production, mining, waste facilities.

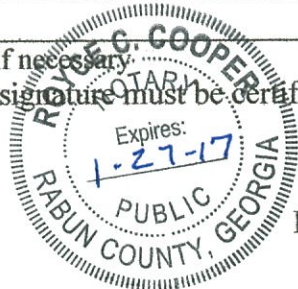
Statement of No Conflict

I certify that I have not audited any component of this facility for which I was responsible for design or development; nor have I within the past year been an employee of the facility, its parent company, or associated affiliates. Excluding audits, assessments or reviews, I have not derived more than 30% of my income within the past 5 years from the facility, its parent, or associated affiliates. I have not participated in more than two consecutive Cyanide Code audits of this facility. I have participated in at least 3 health, safety, and/or environmental audits, assessments or reviews in the past 7 years and am familiar with standard audit procedures as well as with the protocols developed by the International Cyanide Management Institute for implementation of the Code.

Signed,	Name	Signature	Date
Lead Auditor*	Marie K. Dunkle	<i>Marie K. Dunkle</i>	12/29/16
Auditor 1	_____	_____	_____
Auditor 2	_____	_____	_____
Auditor 3	_____	_____	_____
Auditor 4	_____	_____	_____

Use additional pages if necessary.

*The lead auditor's signature must be certified by notarization or equivalent.



R. G. Cooper 12-30-16
Notary