Montana Public Service Commission
Motor Carrier Annual Report

Report must be filed on or before March 31st each year.

All annual report filings must be signed by an owner or officer of the company and notarized by a notary public.

Carrier Name (EXACTLY AS SHOWN ON PSC AUTHORITY)

Bear Paw Outfitters, LLC
Bear Paw Outfitters Auto Tours

PSC Number

9517 See General Instruction # 5

See General Instruction # 1

Reporting Year

2016

mm/yyyy to mm/yyyy format

Reporting Period (if other than calendar year)

to

CARRIER ADDRESS

136 Deep Creek Rd

City
Livingston
State
MT
Zip
59047

Check YES Is the address shown above the carriers official address now on file at the PSC (address at which you now receive monthly notice and other materials from the PSC)?

Check YES If the answer to the above question is NO do you want your official address changed to that shown above?

Carrier e-mail address

optional

Person Completing Report

Name
Cindy Bowers

Phone Number
406-222-6642

E-mail Address
tbowers@reagan.com

optional

Check One

YES DID THE CARRIER TRANSPORT ANY REGULATED INTRASTATE PASSENGERS, HOUSEHOLD GOODS OR GARBAGE DURING THE FILING PERIOD?

NO

If NO See General instruction # 6

Montana Public Service Commission
Transportation Division
1701 Prospect Avenue / PO Box 202601
Helena, MT 59620-2601
OATH

STATE OF Montana

County of Park

I, the undersigned _______________ of the motor carrier, above named, on my oath say that the foregoing return has been prepared, under my direction, from the original books, papers and record of said motor carrier; that I have carefully examined the same and declare the same to be a complete and correct statement of the business and affairs of said motor carrier in respect to each and every matter and thing therein set forth, to the best of my knowledge, information and belief; and I further say that no deductions were made before stating the gross earnings or receipts herein set forth except those shown in the foregoing accounts; and that the accounts and figures contained in the foregoing return embrace all of the financial operations of said motor carrier during the period for which said return is filed.

X _______________
(Signature of owner/officer/authorized representative)

Y owner
(Title)

SUBSCRIBED AND SWORN to before me this ______________ day of ______________, 2017.

(SEAL)

DAVID J. YOUNG
NOTARY PUBLIC
State of Montana
Residing at Livingston, Montana
My Commission Expires January 28, 2019