## RECEIVED

MAR 22 2018

## Montana Public Service Commission Motor Carrier Annual Report

13 A

MONT. P.S. COMMISSION

## 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. (oath page)

Carrier Name (EXACTLY AS SHOWN ON PSC AUTHORITY)		ar Paw Bear Paw		-		<i>(</i> 5							
PSC Number		9517						See General Instruction # 5					
See General Instruction # 1													
Reporting Year	20	17											
Reporting Period (if other than calendar year)    Market													
CARRIER ADDRESS	1	36 Dee	ep Cre	ek R	d								
	City	Living	ston		State		MT		Zip	5904	<i>+</i> 7	]	
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   If the answer to the above question is NO do you want your official address   PSC   PSC													
NO		changed to that shown above?											
Carrier e-mail address								optional					
Person Completing Report													
Name	Cindy Bowers												
	1 .	406-222-6642											
Phone Number						optional							
E-mail Address + bowers @ reagan. com													
Check One													
YES		DID THE CARRIER TRANSPORT ANY REGULATED INTRASTATE											
NO	IX	PASSENGERS, HOUSEHOLD GOODS OR GARBAGE DURING											
If NO See Gene		THE	FILING	PERIO	D?								
instruction #3   Montana Public Service Commission													
			Transpo				JUI1111	1100011					

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

PSC # <u>9517</u> Year <u>2017</u>	
	OATH
STATE OF Montana	
County of Park	SS.
motor carrier; that I have carefully examined the sa of the business and affairs of said motor carrier in r best of my knowledge, information and belief; and gross earnings or receipts herein set forth except th	of the motor carrier, above named, on my oath say my direction, from the original books, papers and record of said ame and declare the same to be a complete and correct statement respect to each and every matter and thing therein set forth, to the I further say that no deductions were made before stating the ose shown in the foregoing accounts; and that the accounts and all of the financial operations of said motor carrier during the
	Dowers
	(Signature of owner/officer/authorized representative)
	owner
	(Title)
SUBSCRIBED AND SWORN to before	me this 19th day of <u>March</u> , 20 <u>18</u> .
(SEAL)	Robi Go J. Boen  Notary Public
BOBI JO F BOEH NOTARY PUBLIC for the State of Montana Residing at Springdale, Montana My Commission Expires June 7, 2021	In and for the State of Montana  Residing at Springdale, MT  My Commission Expires June 7, 2021