Montana Public Service Commission

Motor Carrier Annual Report

Carrier Name
Black Hills Trucking, Inc, PO Drawer 2360, Casper, Wyoming 82602

PSC Number
2215

See General Instruction # 5

See General Instruction # 1

Reporting Year
2018

mm/yyyy to mm/yyyy format

Reporting Period (if other than calendar year)

CARRIER OFFICIAL ADDRESS
(SHOW AS ON FILE IN COMMISSION RECORDS)

Carrier e-mail address

Person Completing Report

Name
Shannan N Coleman

Phone Number
(307)237-9301

E-mail Address
shannan.coleman@truecos.com

Check One

YES
NO X

WERE REGULATED INTRASTATE MOVEMENTS CONDUCTED DURING THE FILING PERIOD?

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

STATE OF   Wyoming

County of   Natrona

I, the undersigned representative 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 records
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.

(Signature of owner/officer/authorized representative)

Account Coordinator

SUBSCRIBED AND SWORN to before me this 
26th day of February 2019

(SEAL)

In and for the State of Wyoming
Residing at Natrona County
My Commission Expires 10/1/2020