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FEB 28 2019

Montana Public Service Commission

MONT. P.S. COMMISSION

			Moto	or C	arrie	r Annı	ıal Re	port					
Carrier Name (EXACTLY AS SHOWN ON PSC AUTHORITY)	Black Hi	lls Truc							Vyom	ing 8	2602		
PSC Number	2215			Se	e Gener	al Instr	uction	# 5					
See Gene	eral Instruc	tion # 1											
Reporting Year	2018												
mm/yyyy to mm/yyyy format Reporting Period (if other than calendar year) / to /													
CARRIER		······································								······································			
OFFICIAL ADDRESS (SHOW AS ON FILE IN COMMISSION RECORDS)													
Carrier e-mail]					***************************************	
address	L					1-1	j						
	F	erson Co	mpletin	g Rep	ort	·	1						
Name	Shannan	N Coler	<u>nan</u>										
Phone Number	(307)237-9301												
E-mail Address	shannan.	colemar	@true	cos.c	om	·							
	Check One												
YES			ERE F	REGI	ULA:	TED IN	TRAS	TAT	F MC	VFN	/FN1	ſS	1
NO	x	WERE REGULATED INTRASTATE MOVEMENTS CONDUCTED DURING THE FILING PERIOD?											
If NO See Ge	eneral						<u> </u>	_ 1 1 1		- I-I\I	<u> </u>]
instruction												:=	

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

Name	Black Hills Trucking, Inc, PO Drawer 2360, Casper, Wyoming 82602
PSC#	2215
YEAR	2018

e en

OATH

STATE OF	Wyoming	
		SS.
County of	Natrona	
foregoing ret of said motor and correct st matter and th say that no de those shown	urn has been prepared, under mearrier; that I have carefully exatement of the business and affing therein set forth, to the best eductions were made before state in the foregoing accounts; and the all of the financial operations	r carrier, above named, on my oath say that the y direction, from the original books, papers and records amined the same and declare the same to be a complete airs of said motor carrier in respect to each and every of my knowledge, information and belief; and I further ing the gross earnings or receipts herein set forth except hat the accounts and figures contained in the foregoing of said motor carrier during the period for which said
		Signature of owner/officer/authorized representative) Account Coordinator
	(SEAL)	(Title) me this Tehrnary 20 19 Notary Public and for the State of Lynning
	NOTAR JACKIE K STATE OF	ission Expires Y PUBLIC MARTINEZ WYOMING FENATRONA