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Montana Public Service Commission
Motor Carrier Annual Report

JAN 22 2019

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	Signature Limou	sines, Inc	
AUTHORITY)			
PSC Number	9433	See General Instruction # 5	
See Gen	neral Instruction # 1		
Reporting Year	2018		
mm/yyyy to mm/yyyy format			
Reporting Period (if other than calendar year)		to /	
CARRIER ADDRESS	295 Road 403 N	•	
	City HAURE State	MT Zip 59501	
Check YES (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 optional address Cncinc C Cncex Cau a Lion. Lon.			
Person Completing Report			
Name	Name C Wood		
Phone Number 406 - 868 - 5466			
E-mail Address Cnil ochiexcauchin.w			
Check One			
YES		PORT ANY REGULATED INTRASTATE	
NO PASSENGERS, HOUSEHOLD GOODS OR GARBAGE DURING			
If NO See General THE FILING PERIOD?			
instruction #	¹³		

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

PSC# 9433 Year 2018	АТН		
STATE OF MONTANA			
County of HILL	SS.		
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 thee 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)		
	OPPRE (Title)		
SUBSCRIBED AND SWORN to before me this 12 day of January, 2019.			
(SEAL)	E. leen Rychen Notary Public		
EILEEN RICHARDSON NOTARY PUBLIC for the State of Montana Residing at Havre. Montana My Commission Expires January 19, 2020	In and for the State of		