

## Montana Public Service Commission

### Motor Carrier Annual Report

Carrier Name  
(EXACTLY AS  
SHOWN ON  
PSC  
AUTHORITY)

DAROM, LLC dba Two Men And A Truck of Montana

PSC Number

9520

See General Instruction # 5

See General Instruction # 1

Reporting Year

2020

Reporting Period (if other than  
calendar year)

mm/yyyy to mm/yyyy format

1

/

2020

to

12

/

2020

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

PO Box 1994, Missoula, MT 59806

Carrier e-mail  
address

info0481@twomen.com

#### Person Completing Report

Name Giselle Bright

Phone Number 406.251.9818

E-mail Address giselle.bright@twomen.com

Check One

YES ☒

NO ☐

WERE REGULATED INTRASTATE MOVEMENTS  
CONDUCTED DURING THE FILING PERIOD?

If NO See General  
instruction #3

Name	DAROM, LLC dba Two Men And A Truck of Montana	
PSC #	9520	
Year	2020	
<b>INTRASTATE REVENUES</b>		
	Household Goods	\$466,894
	Passengers	
	Class C	
	Class D (Garbage)	
	<b>TOTAL INTRASTATE REVENUE</b>	<b>\$466,894</b>
<b>INCOME STATEMENT</b>		
<b>Operating Revenue</b>		
	Intrastate Revenue	\$466,894
	Interstate Revenue	\$66,029
	Non-Regulated Revenue	\$169,026
	<b>TOTAL REVENUE</b>	<b>\$701,949</b>
<b>Operating Expenses</b>		
<b>Salaries &amp; Wages</b>		
	Salaries—Officers & Supervisory Personnel	\$43,412
	Clerical & Administrative	\$63,312
	Drivers & Helpers	\$177,566
	Cargo Handlers	
	Vehicle Repair & Service	
	Other Labor	\$150
<b>Fringes</b>		
	Payroll Taxes	\$27,252
	Workman's Compensation	\$18,165
	Pension & Welfare Expenses	
<b>Operating Supplies &amp; Expenses</b>		
	Fuel for Motor Vehicles	\$26,672
	Vehicle Parts	\$8,133
	Other Operating Supplies & Expenses	\$49,389
<b>Operating Taxes &amp; Licenses</b>		
	Gas, Fuel and Oil Taxes	
	Real Estate & Personal Property Taxes	
	Vehicle License & Registration Fees	\$2,346
	Other Taxes	\$54,489
<b>Depreciation &amp; Amortization</b>		
	Revenue Equipment	\$34,538
	Other	\$6,695
<b>Purchased Transportation</b>		
	With Driver	
	Without Driver	
	Other Purchased Transportation	
<b>Office/General</b>		
	Insurance	\$22,686
	Communications & Utilities	\$7,792
	Building & Office Equipment Rents	\$8,300
	General Supplies & Expenses	\$115,400
	Miscellaneous Expenses	
	Gain on Disposition of Operating Assets	
	Loss on Disposition of Operating Asset (enter as positive number)	
	<b>TOTAL EXPENSES</b>	<b>\$666,298</b>
	<b>NET INCOME OR (LOSS)</b>	<b>\$35,651</b>

Name	DAROM, LLC dba Two Men And A Truck of Montana	
PSC #	9520	
Year	2020	
	<b>BALANCE SHEET</b>	
	<b>(ASSETS)</b>	
	<b><u>CURRENT ASSETS</u></b>	
	Cash & Working Funds	\$306,277
	Special Deposits	
	Temporary Cash Investments	
	Notes Receivable	
	Accounts Receivable	\$24
	Prepayments	\$7,113
	Materials & Supplies	\$6,385
	Other Current Assets	\$933
	<b>TOTAL CURRENT ASSETS</b>	<b><u>\$320,732</u></b>
	<b><u>TANGIBLE PROPERTY</u></b>	
	Carrier Operating Property	\$188,996
	Less: Reserve for Depreciation (enter positive numbers only)	\$88,258
	Carrier Operating Property Leased to Others	
	Less: Reserve for Depreciation (enter positive numbers only)	
	Non-Carrier Operating Property	
	Less: Reserve for Depreciation (enter positive numbers only)	
	<b>TOTAL TANGIBLE PROPERTY</b>	<b><u>\$100,738</u></b>
	<b><u>INTANGIBLE PROPERTY</u></b>	
	Organization, Franchises & Permits	\$30,000
	Less: Reserve for Amortization (enter positive numbers only)	\$22,500
	Other Intangible Property	\$26,000
	Less: Reserve for Amortization (enter positive numbers only)	
	<b>TOTAL INTANGIBLE PROPERTY</b>	<b><u>\$33,500</u></b>
	<b>Other Accounts</b>	
	Investment Securities and Advances	
	Special Funds	
	Deferred Debits	
	<b>Total Other</b>	
	<b>TOTAL ASSETS</b>	<b>\$454,969</b>

Name	DAROM, LLC dba Two Men And A Truck of Montana	
PSC #	9520	
Year	2020	
<b>BALANCE SHEET</b>		
<b>(LIABILITIES)</b>		
<b><u>CURRENT LIABILITIES</u></b>		
Notes Payable & Matured Long Term Obligations		
Accounts Payable		\$8,317
Wages Payable		\$7,460
C.O.D.'s Unremitted		
Taxes Accrued		
Interest Accrued		
Matured Interest		
Other Current Liabilities		\$31,877
<b>TOTAL CURRENT LIABILITIES</b>		<b>\$47,654</b>
<b><u>LONG TERM DEBT DUE WITHIN ONE YEAR</u></b>		
Equipment Obligations and other Debt		\$10,000
<b><u>LONG TERM DEBT DUE AFTER ONE YEAR</u></b>		
Advances Payable		
Equipment Obligations		\$56,138
Less reacquired and nominally issued (enter positive number only)		
Other Long Term Obligations		\$174,100
Less reacquired and nominally issued (enter positive number only)		
<b>TOTAL LONG TERM DEBT</b>		<b>\$240,238</b>
<b><u>Other</u></b>		
Total Deferred Credits		
Total Reserves		
<b>TOTAL OTHER</b>		
<b><u>SHAREHOLDERS' (OR PROPRIETORS' ) EQUITY</u></b>		
Capital Stock		
Proprietors' Capital		~ (\$33,661)
Retained Earnings		\$200,738
<b>TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY</b>		<b>\$167,077</b>
<b>TOTAL LIABILITIES &amp; SHAREHOLDERS'</b>		
<b><u>(OR PROPRIETORS') EQUITY</u></b>		
		<b>\$454,969</b>
<b>TOTAL ASSETS</b>		
		<b>\$454,969</b>
DO TOTAL ASSETS <b>EQUAL</b> TOTAL LIABILITIES & SHAREHOLDERS' (OR PROPRIETORS') EQUITY? IF NOT PLEASE REVIEW AND MAKE CORRECTIONS.		

<b>Name</b>	DAROM, LLC dba Two Men And A Truck of Montana		
<b>PSC#</b>	9520		
<b>YEAR</b>	2020		
<b>MONTHLY CUSTOMER LISTING FOR CLASS D SERVICE</b>			
Customer listing must include at least 20 customers per month during each month of the calendar year.			
	<b>JANUARY</b>	<b>FEBRUARY</b>	<b>MARCH</b>
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	<b>APRIL</b>	<b>MAY</b>	<b>JUNE</b>
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Class D Carrier

Customer listing



Name	DAROM, LLC dba Two Men And A Truck of Montana		
PSC#	9520		
Year			
<b>MONTHLY CUSTOMER LISTING FOR CLASS D SERVICE</b>			
Customer listing must include at least 20 customers per month during each month of the calendar year.			
	<b>JULY</b>	<b>AUGUST</b>	<b>SEPTEMBER</b>
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	<b>OCTOBER</b>	<b>NOVEMBER</b>	<b>DECEMBER</b>
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Class D Carrier

Customer listing

Name	DAROM, LLC dba Two Men And A Truck of Montana
PSC#	9520
YEAR	2020

#### VERIFIED STATEMENT

Schedule 5 must be completed by Class D carriers who did not generate \$5,000 gross revenue from Class D operations and did not serve twenty (20) customers for each month of the calendar year.

The verified statement will be reviewed by the Commission and a determination made whether the certificate should be cancelled.

#### STATEMENT:

N/A

Name	DAROM, LLC dba Two Men And A Truck of Montana
PSC#	9520
YEAR	2020

## OATH

STATE OF Montana

SS.

County of Missoula

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.

Jessie Bright  
(Signature of owner/officer/authorized representative)

General Manager  
(Title)

SUBSCRIBED AND SWORN to before me this

10 day of February 20 21

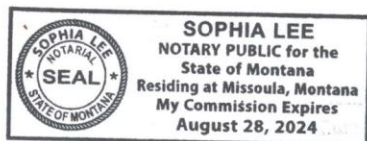
(SEAL)

Sophia Lee  
Notary Public

In and for the State of Montana

Residing at Missoula

My Commission Expires August 28 2024







## CERTIFICATE OF LIABILITY INSURANCE

DAROM-1

OP ID: MEM

DATE (MM/DD/YYYY)  
03/20/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Collins & Associates Corp. 5075 Cascade Rd. SE Grand Rapids, MI 49546 Rhett Kukulski	616-942-0957	CONTACT NAME: Melissa Mason, AU, CLCS, AINS PHONE (A/C, No, Ext): 616-942-0957 FAX (A/C, No): 616-942-1118 E-MAIL: mmason@insuredwithcollins.com ADDRESS:
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: TransGuard Insurance Co.		28886
INSURER B: United States Liability Ins Gp		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED  
Darom LLC dba  
Two Men and a Truck of Montana  
1620 Rodgers Street Suite 2  
Missoula, MT 59802

## COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> \$1000 PD Deduct Per Accident GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X	TCP0001032-03	03/24/2020	03/24/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	X	TCP0001032-03	03/24/2020	03/24/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10000	X	TCU0000700-03	03/24/2020	03/24/2021	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	EPLI		EPL1563189	04/24/2020	04/24/2021	EPLI \$ 1,000,000 Retention \$ 10,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
Certificate Holder is added as Additional Insured where required by written contract.

## CERTIFICATE HOLDER

TWOME-1

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

ACORD 25 (2016/03)

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