

Entered 7/5/11

Address Change

COMMONWEALTH OF PENNSYLVANIA  
PUBLIC UTILITY COMMISSION  
PO BOX 3265  
HARRISBURG, PA 17105-3265



2010 ASSESSMENT REPORT-MOTOR CARRIERS

This Report **MUST BE FILED** not later than **MARCH 31, 2011**. Failure to file by the **March 31, 2011** deadline may result in fines up to \$1,000 for each day a violation continues (66 Pa. C.S. § 3301).

TRADE OR CORPORATE NAME OF UTILITY: REFRIGERATED FOOD EXPRESS, INC.	UTILITY CODE 702331	APPLICATION # A-00113684
CONTACT NAME:		
ADDRESS 1: P.O. BOX 374 - 57 Littlefield St.	ADDRESS 2 (Floor, Suite, etc.): -55 MURPHY DRIVE 57 Littlefield St.	
CITY, STATE, ZIP: AVON MA 02322		

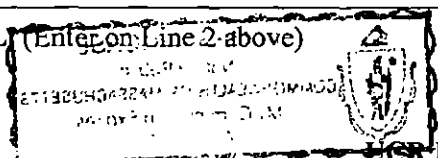
OPERATING REVENUE FOR CALENDAR YEAR 2010 (January 1, 2010-December 31, 2010)  
(All amounts shall be rounded to the nearest dollar.)

	PROPERTY	HOUSEHOLD GOODS	PASSENGER	
			Group and Party 16 or more	Other
1. PA INTRASTATE OPERATING REVENUE	\$ 73,102	\$ 0	\$ 0	\$ 0
2. PA EXEMPT INTRASTATE REVENUE	\$ —	\$ 0	\$ 0	\$ 0
3. PA NET INTRASTATE OPERATING REVENUE (Subtract Line 2 from Line 1)	\$ 73,102	\$ 0	\$ 0	\$ 0

(All amounts shall be rounded to the nearest dollar.)

PA EXEMPT INTRASTATE REVENUE Enter a number from enclosed Exempt Revenue list as applicable. (Attach additional sheets as needed)	PROPERTY	HOUSEHOLD GOODS	PASSENGER	
			Group and Party 16 or more	Other
	\$	\$	\$	
TOTAL (Enter on Line 2 above)	\$ 0	\$ 0	\$ 0	\$ 0

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11 APR - 1 PM 1:20  
Other



UCR REGISTRATION INFORMATION

2010 UCR Registered:  YES  NO

**IF YES:**  
US DOT #: 23868 INTERSTATE OPERATING REVENUE: \$ 14,408,572  
MC Number: 113843

**AUTHORIZATION FOR RELEASE OF STATE TAX RECORDS**

In accordance with Sections 505 and 506 of the Public Utility Code, as a means to verify the accuracy of financial information supplied to the Public Utility Commission, I hereby authorize the Pennsylvania Department of Revenue to release to the Public Utility Commission, any tax records filed or compiled with regard to the below-listed utility and/or individual.

Refrigerated Food Express, Inc  
Utility Name

X Lynne J. Parsons  
Signature

Date: 03/30/11

Lynne J. Parsons  
Name (Printed) Title

**AFFIDAVIT**

I affirm that the information reported herein is complete, true and correct.

Lynne J. Parsons  
(Signature of Individual or Officer)

03/30/11  
(Date)

READABLE (PRINT OR TYPE) NAME OF INDIVIDUAL or OFFICER ABOVE:

Lynne Parsons

TRADE NAME OR CORPORATE NAME OF UTILITY:

Refrigerated Food Express, Inc.

FEDERAL ID:

04-2145681

TELEPHONE NO.:

Office (508) 587-4600 Ext. 210

Cell ( )

**NOTARIZATION** (Required)

Subscribed and sworn to before me

this 30<sup>th</sup> day of March 2011

James L. Morse  
NOTARY SIGNATURE

OFFICIAL SEAL

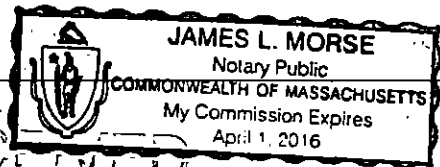
(Official Title)

Name of person to be contacted for additional information:

Name: Lynne Parsons  
(printed)

Telephone: 508-587-4600 Ext. 210

(Date My Commission Expires)



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SECRETARY'S BUREAU