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

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~~ADMINISTRATIVE SERVICES~~
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2015 ASSESSMENT REPORT-MOTOR CARRIERS

This Report **MUST BE FILED** not later than **MARCH 31, 2016**. Failure to file may result in fines up to \$1,000 for each day a violation continues (66 Pa. C.S. § 3301).

A-2010-2197652

TRADE OR CORPORATE NAME OF UTILITY: KARREN D MCABEE - Kennedy		UTILITY CODE 8912656
CONTACT NAME: Karren D. McCabe - Kennedy		
ADDRESS 1: 106 1/2 COOPER STREET	ADDRESS 2 (Floor, Suite, etc.):	
CITY, STATE, ZIP: WEIRTON WV 26062		

OPERATING REVENUE FOR CALENDAR YEAR 2015 (January 1, 2015-December 31, 2015)
 (All amounts shall be rounded to the nearest dollar.)

	PROPERTY	HOUSEHOLD GOODS	PASSENGER	
			Group and Party 16 or more	Passenger 15 and Under
1. PA INTRASTATE OPERATING REVENUE	<i>0</i>			
2. PA EXEMPT INTRASTATE REVENUE	<i>0</i>			
3. PA NET INTRASTATE OPERATING REVENUE (Subtract Line 2 from Line 1)	<i>0</i>			

(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)				

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UCR REGISTRATION INFORMATION

2015 UCR Registered: YES NO

IF YES:
 US DOT #: 1424675 INTERSTATE OPERATING REVENUE: 438869.67
 MC Number: 584190

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.

Karren D. McAbee Kennedy
Utility Name

Karren D. McAbee Kennedy
Signature

Date 3-21-16 Karren D. McAbee owner
Name (Printed) Title

AFFIDAVIT

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

Karren D. McAbee Kennedy 3-21-16
(Signature of Individual or Officer) (Date)

Karren D. McAbee Kennedy

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

W&D Hauling

TRADE NAME OR CORPORATE NAME OF UTILITY:

NOTARIZATION (Required)

Subscribed and sworn to before me this

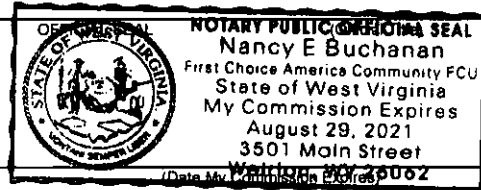
21 day of March 2016
Nancy E. Buchanan
NOTARY SIGNATURE

FEDERAL ID:

16-1736587

TELEPHONE NO.:

Office (304) 797-7424 Ext.
Cell (304) 479-2094



Name of person to be contacted for additional information:

Name: _____ (printed)
Telephone: _____ Ext. _____

8-29-21