

Address changed 10/29/16

Name Change 6/29/16 Original to Com. Pl. License Assignments Copy to Assessments

A-2015-2471543

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

RECEIVED  
ADMINISTRATIVE SERVICES

2016 JUN 29 AM 7:55

PA PUC

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).

TRADE OR CORPORATE NAME OF UTILITY: GUEBARA Delivery & Transportation Services Inc.		UTILITY CODE 8917425
CONTACT NAME: Joseph Guebara		
ADDRESS 1: 4131 Nittany Valley Dr.	ADDRESS 2 (Floor, Suite, etc.):	
CITY, STATE, ZIP: Howard, PA 16841		

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	156,368.26			
2. PA EXEMPT INTRASTATE REVENUE				
3. PA NET INTRASTATE OPERATING REVENUE (Subtract Line 2 from Line 1)	156,368			

(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)	156,368.26			

RECEIVED  
2016 JUN 29 PM 1:48  
PA PUC  
SECRETARY'S BUREAU

UCR REGISTRATION INFORMATION

2015 UCR Registered:  YES  NO Paid 2015 UCR Fee

IF YES:  
US DOT #: 1725 882 INTERSTATE OPERATING REVENUE: 98,171.61  
MC Number: 632481

**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.

Guebara Delivery & Transportation Services Inc.  
Utility Name

[Signature]  
Signature

Date 6-20-16

Joseph Guebara  
Name (Printed)

owner  
Title

**AFFIDAVIT**

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

\_\_\_\_\_  
(Signature of Individual or Officer) (Date)

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

**NOTARIZATION** (Required)  
Subscribed and sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_ 2016

TRADE NAME OR CORPORATE NAME OF UTILITY:

NOTARY SIGNATURE

FEDERAL ID:

TELEPHONE NO.:  
Office ( ) Ext.  
Cell ( )

OFFICIAL SEAL (Official Title)

Name of person to be contacted for additional information:  
  
Name: \_\_\_\_\_ (printed)  
Telephone: \_\_\_\_\_ Ext.

(Date My Commission Expires)