

COMMONWEALTH OF PENNSYLVANIA
 PUBLIC UTILITY COMMISSION
 400 NORTH STREET
 HARRISBURG, PA 17120

REC'D PA PUC FISCAL
 MAR 18 '26 AM 11:32

2025 ASSESSMENT REPORT-MOTOR CARRIERS

This Report **MUST BE FILED** no later than **March 31, 2026**. Failure to file may result in fines up to \$1,000 for each day a violation continues (66 Pa. C.S. § 3301), revocation of your Certificate of Public Convenience, and PennDOT will place registration suspensions on your vehicles.

| | |
|---|--|
| TRADE OR CORPORATE NAME OF UTILITY: RUNKLE BRENDA L | UTILITY CODE: 703670 Original App # A-00115741 BP8 1146366 |
| CONTACT NAME: | EMAIL: |
| ADDRESS 1: PO BOX 327 | ADDRESS 2 (Floor, Suite, etc.): |
| CITY, STATE, ZIP: CRALEY PA 17312 | PHONE NO: 717-751-1788 |

OPERATING REVENUE FOR CALENDAR YEAR 2025 (January 1, 2025-December 31, 2025)

(Enter **WHOLE** dollars only)

| | PROPERTY | HOUSEHOLD GOODS | PASSENGER | |
|--|----------|-----------------|----------------------------|------------------------------------|
| | | | Group and Party 16 or More | All Other Passenger Transportation |
| 1. PA INTRASTATE OPERATING REVENUE | 0 | | | |
| PA EXEMPT INTRASTATE REVENUE (verifying documentation required for all exempt revenue) | | | | |
| Exemption # | | | | |
| Exemption # | | | | |
| Exemption # | | | | |
| Exemption # | | | | |
| 2. TOTAL Exempt Revenue | 0 | | | |
| 3. PA NET INTRASTATE OPERATING REVENUE (Subtract Line 2 from Line 1) | 0 | | | |

UCR REGISTRATION INFORMATION

2026 UCR Registered: YES NO US DOT#: _____

Date 2026 Fee was Paid: We have retired

Internal Use Only

A-1 C-1 AB-1

AUTHORIZATION FOR RELEASE OF STATE TAX RECORDS

In accordance with Sections 505 and 506 of the Public Utility Code, 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 regarding the below-listed utility and/or individual.

Utility Name _____

Signature _____

Date _____

Name (Printed) _____

Title _____

AUTHORIZATION FOR ABANDONMENT

Approval of the abandonment is necessary or proper for the following reasons:

Reason(s) _____

Signature _____

AFFIDAVIT

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

Bruce L. Rundle
(Signature of Individual or Officer)

3-13-2016
(Date)

NOTARIZATION

(Required)

Subscribed and sworn to before me this

13 day of March 2016

Judy A. Stearns
(NOTARY SIGNATURE)

OFFICIAL TITLE _____

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

OFFICIAL SEAL

Commonwealth of Pennsylvania - Notary Seal
Judy A. Stearns, Notary Public
York County
My Commission Expires January 6, 2030
Commission Number 1160318

TELEPHONE NO.:

Office () _____

Other () _____

Other () _____

(Date My Commission Expires)