

BEFORE THE STATE CORPORATION COMMISSION  
OF THE STATE OF KANSAS

In the Matter of the Investigation of Redline )  
Tow LLC of Linwood, Kansas, regarding the )  
Violation(s) of the Motor Carrier Safety )  
Statutes, Rules and Regulations and the ) Docket No. 24-TRAM-766-UCR  
Commission's Authority to Impose Penalties, )  
Sanctions and/or the Revocation of Motor )  
Carrier Authority. )

**PROOF OF SERVICE**

The undersigned, Ahsan A. Latif, Litigation Counsel, hereby makes record that pursuant to the attached Domestic Return Receipt, that Misty C. of Redline Tow LLC of Linwood, Kansas, received valid service of the Penalty Order on 6-4-24, issued by the Commission on 5-30-24.

Dated this 11th day of June, 2024.


Respectfully submitted,

*/s/ Ahsan A. Latif*

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Ahsan A. Latif, S.Ct. #24709  
Litigation Counsel  
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For Commission Staff

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i>      <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)      C. Date of Delivery  <input type="checkbox"/> <i>[Signature]</i>      <input type="checkbox"/> 6/4/24</p>
<p>1. Article Addressed to:</p> <p><b>BRIAN CHRISTENSON, OWNER  REDLINE TOW LLC  416 BOWEN  PO BOX 214  LINWOOD, KS 66052-0214</b></p>  <p>9590 9402 8288 3094 7964 53</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  or delivery address below: <input type="checkbox"/> No</p> <p><i>Kansas Corporation Commission  Office of Limitation Counsel  JUN 06 2024</i></p> <p><input type="checkbox"/> Adult Signature  <input type="checkbox"/> Adult Signature Restricted Delivery  <input checked="" type="checkbox"/> Certified Mail®  <input type="checkbox"/> Certified Mail Restricted Delivery  <input type="checkbox"/> Collect on Delivery  <input type="checkbox"/> Collect on Delivery Restricted Delivery  <input type="checkbox"/> Mail  <input type="checkbox"/> Mail Restricted Delivery (00)</p> <p><input type="checkbox"/> Priority Mail Express®  <input type="checkbox"/> Registered Mail™  <input type="checkbox"/> Registered Mail Restricted Delivery  <input type="checkbox"/> Signature Confirmation™  <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7022 2410 0002 9316 4661</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span></p>	