

BEFORE THE STATE CORPORATION COMMISSION  
OF THE STATE OF KANSAS

In the Matter of the Investigation of **Crazy G** )  
**LLC, of Atwood, Kansas,** Regarding the )  
Violation(s) of the Motor Carrier Safety )  
Statutes, Rules and Regulations and the ) Docket No. 19-TRAM-360-PEN  
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, on March 28, 2019, Crazy G LLC received valid service of the Penalty Order issued by the Commission on March 19, 2019.

Dated this 5<sup>th</sup> day of April, 2019.

Respectfully submitted,



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

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits. 19-360-PEN

GARTH GRIFFITH: MANAGING MEMBER  
CRAZY G LLC  
21372 E HILL DR  
ATWOOD, KS 67730-3173



9590 9402 2589 6336 9048 56

2. Article Number (Transfer from service label)

7016 1970 0001 0574 6251

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X  ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

Garth Griffith 3-8-9

C. Date of Delivery

Address different from item 1? ☐ Yes  
or delivery address below: ☐ No

## 3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail Restricted Delivery        |   |

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt