

BEFORE THE STATE CORPORATION COMMISSION
OF THE STATE OF KANSAS

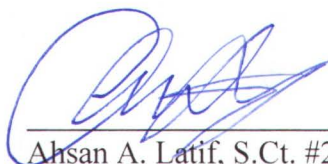
In the Matter of the Investigation of **Crystal's**)
Livestock Express, L.L.C., of Pittsburg,)
Kansas, Regarding the Violation(s) of the)
Motor Carrier Safety Statutes, Rules and) Docket No. 19-TRAM-424-PEN
Regulations and the Commission's Authority)
to Impose Penalties, Sanctions and/or the)
Revocation 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 May 3, 2019, Crystal's Livestock Express, L.L.C. received valid service of the Penalty Order issued by the Commission on April 30, 2019.


Dated this 8th day of May, 2019.

Respectfully submitted,



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

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits. 19-424-PEN</p>		<p>A. Signature X <i>[Signature]</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p>	
		B. Received by (Printed Name) KOHLER Cristl	C. Date of Delivery 5-3-19
<p>DAVID E CRYSTAL, MANAGER CRYSTAL'S LIVESTOCK EXPRESS, L.L.C. 692 E 600 AVE PITTSBURG, KS 66762</p>		<p>Address different from item 1? <input type="checkbox"/> Yes Delivery address below: <input type="checkbox"/> No</p>	
<p> 4-30 9590 9402 2589 6336 9322 93</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>Article Number (Transfer from service label) 7012 2920 0001 4263 3954</p>			

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

Domestic Return Receipt