

BEFORE THE STATE CORPORATION COMMISSION
OF THE STATE OF KANSAS

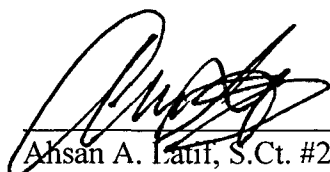
In the Matter of the Investigation of **J & M**)
Express LLC, of Garden City, Kansas,)
Regarding the Violation(s) of the Motor)
Carrier Safety Statutes, Rules and Regulations) Docket No. 18-TRAM-360-PEN
and the Commission's Authority to Impose)
Penalties, Sanctions and/or the Revocation of)
Motor Carrier Authority.)

PROOF OF SERVICE

The undersigned, Ahsan A. Latif, Litigation Counsel, hereby makes record that pursuant to the attached Domestic Return Receipt, on March 6, 2018, J & M Express LLC received valid service of the Penalty Order issued by the Commission on March 1, 2018.


Dated this 14th day of March, 2018.

Respectfully submitted,



Ahsan A. Latif, S.Ct. #24709
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Kansas Corporation Commission
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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. 9-360-PEN</p>		<p>A. Signature <input checked="" type="checkbox"/> X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>JIMMY GARDIA JR. - MANAGING MEMBER J & M EXPRESS LLC 106 N 9TH STREET GARDEN CITY, KS 67846-8353</p>		<p>B. Received by (Printed Name) LUZ</p> <p>C. Date of Delivery 3-6-18</p>	
		<p>Address different from item 1? <input type="checkbox"/> Yes or delivery address below: <input type="checkbox"/> No</p>	
<p>3-1  9590 9402 2589 6336 9030 33</p>		<p>3. Service Type <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"/> Insured Restricted Delivery</p>	
<p>2. Article Number (Transfer from service label) 7016 1970 0001 0574 4127</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9058</p>		<p>Domestic Return Receipt</p>	