

BEFORE THE STATE CORPORATION COMMISSION
OF THE STATE OF KANSAS

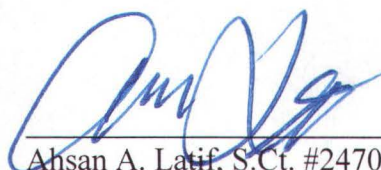
In the Matter of the Investigation of **Galen**)
Unruh, d/b/a A & B Transport, of Galva,)
Kansas, Regarding the Violation(s) of the)
Motor Carrier Safety Statutes, Rules and) Docket No. 17-TRAM-523-PEN
Regulations and the Commission's Authority)
to Impose Penalties, Sanctions and/or the)
Revocation of 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 June 9, 2017, Galen Unruh, d/b/a A & B Transport received valid service of the Penalty Order issued by the Commission on June 6, 2017.

Dated this 14 day of June, 2017.

Respectfully submitted,



Ahsan A. Latif, S.Ct. #24709
Litigation Counsel
Kansas Corporation Commission
1500 SW Arrowhead Road
Topeka, Kansas 66604
(785) 271-3118 (Telephone)
(785) 271-3167 (Facsimile)
a.latif@kcc.ks.gov (Email)

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. 17-523-PEN</p>		<p>A. Signature <div style="display: flex; align-items: center;"> X </div> </p> <p style="text-align: right;"> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee </p>	
		<p>B. Received by (Printed Name) <div style="display: flex; align-items: center;"> X </div> </p>	<p>C. Date of Delivery <div style="display: flex; align-items: center;"> X </div> </p>
<p>GALEN UNRUH, OWNER GALEN UNRUH D/B/A A & B TRANSPORT PO BOX 488 GALVA, KS 67443-0488</p>		<p>Address different from item 1? <input type="checkbox"/> Yes or delivery address below: <input checked="" type="checkbox"/> No</p>	
<div style="text-align: center;"> 9590 9402 2448 6249 6035 67 </div>		<p>3. Service Type</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <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 </div> <div style="width: 45%;"> <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 </div> </div>	
<p>2. Article Number (Transfer from service label) <div style="display: flex; align-items: center;"> b6 </div> </p>			