

BEFORE THE STATE CORPORATION COMMISSION  
OF THE STATE OF KANSAS

In the Matter of the Investigation of Novak )  
Farms Trucking LLC of Tampa, Kansas, )  
Regarding the Violation(s) of the Motor )  
Carrier Safety Statutes, Rules and Regulations ) Docket No. 24-TRAM-332-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, Novak Farms Trucking LLC of Tampa, KS, received valid service of the Penalty Order on 11-13-23; issued by the Commission on 11-7-23.

Dated this 15<sup>th</sup> day of November, 2023.

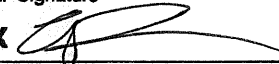
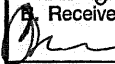
Respectfully submitted,

*/s/ Ahsan A. Latif*

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Ahsan A. Latif, S.Ct. #24709  
Litigation Counsel  
Kansas Corporation Commission  
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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 <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>X </p>	
<p>1. Article Addressed to:</p> <p>CHRISTOPHER M NOVAK, MEMBER NOVAK FARMS TRUCKING LLC 2973 MUSTANG TAMPA, KS 67483</p> <p>9590 9402 8146 3030 1107 44</p>	<p>B. Received by (Printed Name)</p> <p></p>	<p>C. Date of Delivery</p> <p>11-13-23</p>
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0737 2733 61</p>	<p>address different from item 1? <input type="checkbox"/> Yes or delivery address below: <input type="checkbox"/> No</p> <p>Office</p> <p>NOV 15 2023</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Adult Signature</li> <li><input type="checkbox"/> Adult Signature Restricted Delivery</li> <li><input checked="" type="checkbox"/> Certified Mail®</li> <li><input type="checkbox"/> Certified Mail Restricted Delivery</li> <li><input type="checkbox"/> Collect on Delivery</li> <li><input type="checkbox"/> Collect on Delivery Restricted Delivery</li> <li><input type="checkbox"/> Priority Mail Express®</li> <li><input type="checkbox"/> Registered Mail™</li> <li><input type="checkbox"/> Registered Mail Restricted Delivery</li> <li><input type="checkbox"/> Signature Confirmation™</li> <li><input type="checkbox"/> Signature Confirmation Restricted Delivery</li> </ul>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 <span style="float: right;">Domestic Return Receipt</span></p>		