

BEFORE THE STATE CORPORATION COMMISSION  
OF THE STATE OF KANSAS

In the Matter of the Investigation of **K & L** )  
**Tank Truck Service, Inc., of Garden City,** )  
**Kansas,** Regarding the Violation(s) of the )  
Motor Carrier Safety Statutes, Rules and ) Docket No. 19-TRAM-445-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 14, 2019, K & L Tank Truck Service, Inc. received valid service of the Penalty Order issued by the Commission on May 7, 2019.


Dated this 20<sup>th</sup> day of May, 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 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. <i>19-445-PEN</i></p>		<p>A. Signature <i>[Signature]</i> <input checked="" type="checkbox"/> Agent</p> <p>X <i>[Signature]</i></p> <p>B. Received by (Printed name) <i>Thomas H. [unclear]</i> <i>11/15-14-19</i></p> <p>ddress <i>[unclear]</i> <input type="checkbox"/> Yes</p> <p>or deliver <i>[unclear]</i> <input type="checkbox"/> No</p>	
<p>THOMAS HERRELL, VICE PRESIDENT K &amp; L TANK TRUCK SERVICE, INC. PO BOX 821 GARDEN CITY, KS 67846</p>			
<p> 51 9590 9402 2589 6336 9321 25</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 (over \$500)</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>2. Article Number (Transfer from service label)</p> <p>7012 2920 0001 4263 3787</p>			
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	