

BEFORE THE STATE CORPORATION COMMISSION  
OF THE STATE OF KANSAS

In the Matter of the Investigation of **PPJ** )  
**Construction Inc, of Wichita, Kansas,** )  
Regarding the Violation(s) of the Motor )  
Carrier Safety Statutes, Rules and Regulations ) Docket No. 20-TRAM-309-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 February 6, 2020, PPJ Construction Inc received valid service of the Penalty Order issued by the Commission on February 4, 2020.


Dated this 10<sup>th</sup> day of February, 2020.

Respectfully submitted,



Ahsan A. Latif, S.Ct. #24709  
Litigation Counsel  
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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. <i>20-309-PEN</i></li> </ul>		<p>A. Signature  <input checked="" type="checkbox"/> <i>Ruth Barboza</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
		<p>B. Received by (Printed Name)  <i>Ruth Barboza</i></p>	<p>C. Date of Delivery  <i>2-6-20</i></p>
<p>JESUS A. SOLIS, PRESIDENT  PPJ CONSTRUCTION INC  3750 N OLD LAWRENCE RD  WICHITA, KS 67219</p>		<p>Address different from item 1? <input type="checkbox"/> Yes  or delivery address below: <input type="checkbox"/> No</p>	
<p>  <i>2-4</i> 9590 9402 2218 6193 7313 79</p>		<p>3. Service Type</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"/> Registered Mail</li> <li><input type="checkbox"/> Registered Mail Restricted Delivery</li> <li><input type="checkbox"/> Return Receipt for Merchandise</li> <li><input type="checkbox"/> Signature Confirmation™</li> <li><input type="checkbox"/> Signature Confirmation Restricted Delivery</li> <li><input type="checkbox"/> Priority Mail Express®</li> </ul>	
<p>2. Article Number (Transfer from service label)  7012 2920 0001 4263 6252</p>		<p><input type="checkbox"/> All Restricted Delivery</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	