

**BEFORE THE STATE CORPORATION COMMISSION
OF THE STATE OF KANSAS**

In the Matter of the Investigation of Royce)
Varela d/b/a Varela Trucking of Garden City)
Kansas. Regarding the Violation(s) of the) Docket No. 24-TRAM-587-PEN
Motor Carrier Safety Statutes, Rules and)
Regulations and the Commission's Authority)
to Impose Penalties, Sanctions and/or the)
Revocation of Motor Carrier Authority)

**NOTICE OF FILING OF STAFF'S PUBLIC
HEARING EXHIBITS**

COMES NOW, the Staff of the State Corporation Commission of the State of Kansas (Staff and Commission, respectively), and files Staff's Hearing Exhibits, which were accepted into the record at the Evidentiary Hearing in the above-captioned matter on Thursday, March 14, 2024. These documents were sent via electronic communication to all parties and the pre-hearing officer on Wednesday, March 13, 2024.

Staff has redacted portions of the Exhibits to protect against the publication of personally identifiable information of the motor carrier.

WHEREFORE, Staff submits its Hearing Exhibits for Commission review and consideration and for such other relief as the Commission deems just and reasonable.

Respectfully submitted,

/s/ Carly R. Masenthin

Carly R. Masenthin, #27944

Senior Litigation Counsel

1500 SW Arrowhead Rd

Topeka, KS 66604

Phone (785) 271-3265

Email: c.masenthin@kcc.ks.gov

KCC WRITTEN STATEMENT

Signed Statement of Royce Varela owner of Royce Varela d/b/a Varela Trucking

Representative of Motor Carrier Royce Varela

USDOT# 2379357

I, Royce Varela, voluntarily give the following statement to Erica Pargas & Penny Fryback, who have identified themselves as Special Investigators for the State Of Kansas, Kansas Corporation Commission. No threats or promises have been made to me in exchange for this statement.

NARRATIVE:

I, Royce Varela report that on or about 5/22/2023, I flew to Fall River, MA to purchase a 2008 Kenworth with VIN [REDACTED] 5238 from Edgardo Vega Velazco and then I, Royce Varela drove this vehicle back to the State of Kansas.

I, Royce Varela did not retain copies of bills of lading, scale tickets, or invoices for any loads hauled by Royce Varela d/b/a Varela Trucking in the last six (6) months.

I have read the foregoing statement consisting of 1 page(s). It is true, accurate and complete to the best of my knowledge. I reviewed any changes and they bear my initials.

I sign this statement under the penalty of perjury in the presence of _____.

Witness'/Interviewee's signature

Date

2/1/24

I certify that I prepared and took the above statement and that it is a complete and accurate summary of my interview with the witness.

Safety Investigator's Signature

Date

Penny Fryback

2/1/24

KANSAS DEPARTMENT OF REVENUE
BILL OF SALE
 ksrevenue.gov

This Bill of Sale is an affidavit of the amount of money or value that was exchange between the seller(s) and buyer(s) for the vehicle listed herein. ONLY antique vehicles (vehicles 35 years old or older) can have the ownership transferred (sold) by bill of sales. All other vehicles sold by or purchased from a Kansas resident must have the ownership transferred (sold) by assigned title.

Seller InformationPrinted Name Edgardo Vega VelazcoAddress [REDACTED]City Fall RiverState MassachusettsZIP 02720**Buyer Information**Printed Name Royce VarelaAddress [REDACTED]City Garden CityState KansasZIP 67846**Vehicle Information**Year 2008 Make KWVIN [REDACTED] 6238Purchase Price: \$ 5,000Date of Sale: 5-22-23

By our signatures, we swear and affirm the above stated purchase price is true and accurate under penalty of perjury. I am aware that the law provides severe penalties for making false statements under oath.

Signature of Seller Edgardo Vega VelazcoDate 5-22-23Signature of Buyer [REDACTED]Date 5-22-23**Antique Vehicle Transfer of Ownership**

Complete only if no title is available.

This section of the bill of sale is to be used to transfer ownership of an antique vehicle (vehicle that is 35 model years old or older) when there is no Kansas title for the vehicle in the name of the owner / seller. All information in the bill of sale above and the antique vehicle transfer of ownership below MUST be complete for this to be a valid assignment of ownership. If a non-Kansas resident owns the antique vehicle and the vehicle is not maintained / garaged in Kansas, the ownership of the vehicle must be transferred according to the laws of the seller's home state of residence.

I, the undersigned, certify that I am the owner of this antique vehicle, which is listed above, and on this day I have sold and am transferring ownership of this vehicle to [REDACTED] listed above as buyer. To the best of my knowledge, no title has been issued in my name for this vehicle in any titling jurisdiction.

I further certify that I will guarantee this vehicle to be free and clear from all defects, liens or encumbrances of any nature whatsoever and that I will indemnify any subsequent purchaser of same for any loss sustained should anyone prove ownership of said vehicle superior to my title.

Date vehicle was sold and delivered: _____

Signature of Seller: _____

Notice to Buyer:
Vehicle

All antique vehicles 60-years old or newer sold on a bill of sale must obtain an MVE-1, (Motor Examination) issued by the Kansas Highway Patrol or their designee and submit the MVE-1 with this bill of sale when applying for antique title. Application for title must be made within 60 days of the purchase date in the county treasurer's motor vehicle office in the county in which the vehicle will be located / garaged. Penalty will be assessed on and after the 61st day.

**WARNING:**

Federal and Massachusetts laws require that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

**ANY ERASURES, WHITE-OUTS OR CROSS-OUTS WILL VOID THE ASSIGNMENT
AND ALL ASSIGNMENTS THAT FOLLOW**

ASSIGNMENT OF CERTIFICATE OF TITLE BY OWNER

THIS IS TO BE COMPLETED BY THE SELLER and delivered to the Purchaser with the vehicle. If a Non-Dealer sale, purchaser must make application for a new Certificate of Title on MA form RMV-1, and file it immediately with the Massachusetts RMV and surrender the assigned Title.

I/we hereby assign, transfer, and convey the motor vehicle described on the reverse side of this certificate, for the sale price herein stated, to the following named purchaser, and I/we hereby warrant the Title to said motor vehicle and that same is free of all liens and encumbrances.

SALE PRICE: \$ 5,000	PRINT NAME OF PURCHASER(S) Royce Varela	DATE OF SALE: 5-22-23
STREET: [REDACTED]	CITY: Garden City	STATE: KS ZIP: 67846

ODOMETER DISCLOSURE STATEMENT CAUTION: ONLY CHECK A BOX IF THE ODOMETER READING DIFFERS FROM ACTUAL MILEAGE

"I certify to the best of my knowledge the odometer reading specified here is the actual mileage of the vehicle, unless one of the following statements is checked:"

106078

No
Tenths

☐

1. I hereby certify to the best of my knowledge the odometer reading stated is in excess of its mechanical limits. (The odometer started at zero again.)

☐

2. I hereby state the odometer reading is not the actual mileage.
WARNING - ODOMETER DISCREPANCY

SIGNATURE OF SELLER(S) Edgardo Vega Velazquez	PRINTED NAME(S) OF SELLER(S) Edgardo Vega Velazquez	DATE: 2-8-28
SIGNATURE(S) OF PURCHASER(S) [Signature]	PRINTED NAME(S) OF PURCHASER(S) Royce Varela	DATE: 5-22-23

1st RE-ASSIGNMENT BY LICENSED DEALER ONLY

The undersigned licensed Dealer hereby certifies that the Title to the motor vehicle described on the face of this Certificate of Title was transferred to:

PRINT NAME OF PURCHASER(S):	PRINT ADDRESS:
SIGNATURE(S) OF PURCHASER(S):	PRINTED NAME(S) OF PURCHASER(S):
	DATE:

ODOMETER DISCLOSURE STATEMENT CAUTION: ONLY CHECK A BOX IF THE ODOMETER READING DIFFERS FROM ACTUAL MILEAGE

"I certify to the best of my knowledge the odometer reading specified here is the actual mileage of the vehicle, unless one of the following statements is checked:"

[REDACTED]

No
Tenths

☐

1. I hereby certify to the best of my knowledge the odometer reading stated is in excess of its mechanical limits. (The odometer started at zero again.)

☐

2. I hereby state the odometer reading is not the actual mileage.
WARNING - ODOMETER DISCREPANCY

DEALER'S LICENSE NUMBER:	DEALERSHIP NAME AND ADDRESS:
SIGNATURE OF LICENSED DEALER:	PRINT NAME:
	DATE:

2nd RE-ASSIGNMENT BY LICENSED DEALER ONLY

The undersigned licensed Dealer hereby certifies that the Title to the motor vehicle described on the face of this Certificate of Title was transferred to:

PRINT NAME OF PURCHASER(S):	PRINT ADDRESS:
SIGNATURE(S) OF PURCHASER(S):	PRINTED NAME(S) OF PURCHASER(S):
	DATE:

ODOMETER DISCLOSURE STATEMENT CAUTION: ONLY CHECK A BOX IF THE ODOMETER READING DIFFERS FROM ACTUAL MILEAGE

"I certify to the best of my knowledge the odometer reading specified here is the actual mileage of the vehicle, unless one of the following statements is checked:"

[REDACTED]

No
Tenths

☐

1. I hereby certify to the best of my knowledge the odometer reading stated is in excess of its mechanical limits. (The odometer started at zero again.)

☐

2. I hereby state the odometer reading is not the actual mileage.
WARNING - ODOMETER DISCREPANCY

DEALER'S LICENSE NUMBER:	DEALERSHIP NAME AND ADDRESS:
SIGNATURE OF LICENSED DEALER:	PRINT NAME:
	DATE:

3rd RE-ASSIGNMENT BY LICENSED DEALER ONLY

The undersigned licensed Dealer hereby certifies that the Title to the motor vehicle described on the face of this Certificate of Title was transferred to:

PRINT NAME OF PURCHASER(S):	PRINT ADDRESS:
SIGNATURE(S) OF PURCHASER(S):	PRINTED NAME(S) OF PURCHASER(S):
	DATE:

ODOMETER DISCLOSURE STATEMENT CAUTION: ONLY CHECK A BOX IF THE ODOMETER READING DIFFERS FROM ACTUAL MILEAGE

"I certify to the best of my knowledge the odometer reading specified here is the actual mileage of the vehicle, unless one of the following statements is checked:"

[REDACTED]

No
Tenths

☐

1. I hereby certify to the best of my knowledge the odometer reading stated is in excess of its mechanical limits. (The odometer started at zero again.)

☐

2. I hereby state the odometer reading is not the actual mileage.
WARNING - ODOMETER DISCREPANCY

DEALER'S LICENSE NUMBER:	DEALERSHIP NAME AND ADDRESS:
SIGNATURE OF LICENSED DEALER:	PRINT NAME:
	DATE:

 U.S. Department of Transportation Federal Motor Carrier Safety Administration		MOTOR CARRIER IDENTIFICATION REPORT (Application for U.S. DOT NUMBER)																																																																																															
REASON FOR FILING (Check Only One) <input type="checkbox"/> NEW APPLICATION <input checked="" type="checkbox"/> BIENNIAL UPDATE OR CHANGES <input type="checkbox"/> OUT OF BUSINESS NOTIFICATION <input type="checkbox"/> REAPPLICATION (AFTER REVOCATION OF NEW ENTRANT)																																																																																																	
1. NAME OF MOTOR CARRIER ROYCE VARELA				2. TRADE OR D.B.A. (DOING BUSINESS AS) NAME VARELA TRUCKING																																																																																													
3. PRINCIPAL ADDRESS 804 4TH ST			4. CITY GARDEN CITY		5. STATE/PROVINCE KANSAS		6. ZIP CODE + 4 67846		7. COLONIA (MEXICO ONLY)																																																																																								
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13. PRINCIPAL BUSINESS PHONE NUMBER (620) 290-0571			14. PRINCIPAL CONTACT CELL PHONE NUMBER				15. PRINCIPAL BUSINESS FAX NUMBER																																																																																										
16. USDOT NO. 2379357		17. MC OR MX NO.		18. DUN & BRADSTREET NO.		19. IRS/TAX ID NO. EIN# [REDACTED] SSN# [REDACTED]																																																																																											
20. INTERNET E-MAIL ADDRESS						21. CARRIER MILEAGE (to nearest 10,000 miles for Last Calendar Year) YEAR 81000 2022																																																																																											
22. COMPANY OPERATION (Mark all that apply) A. Interstate Carrier B. Intrastate Hazmat Carrier <input checked="" type="checkbox"/> C. Intrastate Non-Hazmat Carrier D. Interstate Hazmat Shipper E. Intrastate Hazmat Shipper F. Vehicle Registrant Only																																																																																																	
23. OPERATION CLASSIFICATION (Circle All that Apply) A. Authorized For-Hire D. Private Passengers (Business) G. U. S. Mail J. Local Government <input checked="" type="checkbox"/> B. Exempt For-Hire E. Private Passengers (Non-Business) H. Federal Government K. Indian Tribe C. Private Property F. Migrant I. State Government L. Other																																																																																																	
24. CARGO CLASSIFICATIONS (Circle All that Apply) A. GENERAL FREIGHT F. LOGS, POLES, BEAMS, LUMBER J. FRESH PRODUCE P. GRAIN, FEED, HAY V. COMMODITIES DRY BULK BB. CONSTRUCTION B. HOUSEHOLD GOODS G. BUILDING MATERIALS K. LIQUIDS/GASES Q. COAL/COKE W. REFRIGERATED FOOD CC. WATER WELL C. METAL; SHEETS; COILS; ROLLS H. MOBILE HOMES L. INTERMODAL CONT. R. MEAT X. BEVERAGES <input checked="" type="checkbox"/> D. OTHER D. MOTOR VEHICLES I. MACHINERY, LARGE OBJECTS M. PASSENGERS S. GARBAGE, REFUSE, TRASH Y. PAPER PRODUCTS SAND, ROCK, MANURE E. DRIVE AWAY/TOWAWAY N. OIL FIELD EQUIPMENT T. U.S. MAIL Z. UTILITY O. LIVESTOCK U. CHEMICALS AA. FARM SUPPLIES																																																																																																	
25. HAZARDOUS MATERIALS CARRIED OR SHIPPED (Circle All that Apply) C-CARRIED S-SHIPPED B(BULK) - IN CARGO TANKS NB(NON-BULK) - IN PACKAGE <table style="width:100%; font-size: small;"> <tr> <td>C S A. DIV 1.1</td> <td>B NB</td> <td>C S K. DIV 2.2A (Ammonia)</td> <td>B NB</td> <td>C S U. DIV 4.2</td> <td>B NB</td> <td>C S EE. HRCQ</td> <td>B NB</td> </tr> <tr> <td>C S B. DIV 1.2</td> <td>B NB</td> <td>C S L. DIV 2.3A</td> <td>B NB</td> <td>C S V. DIV 4.3</td> <td>B NB</td> <td>C S FF. CLASS 8</td> <td>B NB</td> </tr> <tr> <td>C S C. DIV 1.3</td> <td>B NB</td> <td>C S M. DIV 2.3B</td> <td>B NB</td> <td>C S W. DIV 5.1</td> <td>B NB</td> <td>C S GG. CLASS 8A</td> <td>B NB</td> </tr> <tr> <td>C S D. DIV 1.4</td> <td>B NB</td> <td>C S N. DIV 2.3C</td> <td>B NB</td> <td>C S X. DIV 5.2</td> <td>B NB</td> <td>C S HH. CLASS 8B</td> <td>B NB</td> </tr> <tr> <td>C S E. DIV 1.5</td> <td>B NB</td> <td>C S O. DIV 2.3D</td> <td>B NB</td> <td>C S Y. DIV 6.2</td> <td>B NB</td> <td>C S II. CLASS 9</td> <td>B NB</td> </tr> <tr> <td>C S F. DIV 1.6</td> <td>B NB</td> <td>C S P. Class 3</td> <td>B NB</td> <td>C S Z. DIV 6.1A</td> <td>B NB</td> <td>C S JJ. ELEVATED TEMP MAT.</td> <td>B NB</td> </tr> <tr> <td>C S G. DIV 2.1</td> <td>B NB</td> <td>C S Q. Class 3A</td> <td>B NB</td> <td>C S AA. DIV 6.1B</td> <td>B NB</td> <td>C S KK. INFECTIOUS WASTE</td> <td>B NB</td> </tr> <tr> <td>C S H. DIV 2.1 LPG</td> <td>B NB</td> <td>C S R. Class 3B</td> <td>B NB</td> <td>C S BB. DIV 6.1 Poison</td> <td>B NB</td> <td>C S LL. MARINE POLLUTANTS</td> <td>B NB</td> </tr> <tr> <td>C S I. DIV 2.1 (Methane)</td> <td>B NB</td> <td>C S S. COM LIQ</td> <td>B NB</td> <td>C S CC. DIV 6.1 SOLID</td> <td>B NB</td> <td>C S MM. HAZARDOUS SUB(RQ)</td> <td>B NB</td> </tr> <tr> <td>C S J. DIV 2.2</td> <td>B NB</td> <td>C S T. DIV 4.1</td> <td>B NB</td> <td>C S DD. CLASS 7</td> <td>B NB</td> <td>C S NN. HAZARDOUS WASTE</td> <td>B NB</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>C S</td> <td>OO. ORM</td> <td>B NB</td> <td></td> </tr> </table>										C S A. DIV 1.1	B NB	C S K. DIV 2.2A (Ammonia)	B NB	C S U. DIV 4.2	B NB	C S EE. HRCQ	B NB	C S B. DIV 1.2	B NB	C S L. DIV 2.3A	B NB	C S V. DIV 4.3	B NB	C S FF. CLASS 8	B NB	C S C. DIV 1.3	B NB	C S M. DIV 2.3B	B NB	C S W. DIV 5.1	B NB	C S GG. CLASS 8A	B NB	C S D. DIV 1.4	B NB	C S N. DIV 2.3C	B NB	C S X. DIV 5.2	B NB	C S HH. CLASS 8B	B NB	C S E. DIV 1.5	B NB	C S O. DIV 2.3D	B NB	C S Y. DIV 6.2	B NB	C S II. CLASS 9	B NB	C S F. DIV 1.6	B NB	C S P. Class 3	B NB	C S Z. DIV 6.1A	B NB	C S JJ. ELEVATED TEMP MAT.	B NB	C S G. DIV 2.1	B NB	C S Q. Class 3A	B NB	C S AA. DIV 6.1B	B NB	C S KK. INFECTIOUS WASTE	B NB	C S H. DIV 2.1 LPG	B NB	C S R. Class 3B	B NB	C S BB. DIV 6.1 Poison	B NB	C S LL. MARINE POLLUTANTS	B NB	C S I. DIV 2.1 (Methane)	B NB	C S S. COM LIQ	B NB	C S CC. DIV 6.1 SOLID	B NB	C S MM. HAZARDOUS SUB(RQ)	B NB	C S J. DIV 2.2	B NB	C S T. DIV 4.1	B NB	C S DD. CLASS 7	B NB	C S NN. HAZARDOUS WASTE	B NB					C S	OO. ORM	B NB	
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26. NUMBER OF VEHICLES THAT CAN BE OPERATED IN THE U.S. <table style="width:100%; font-size: x-small;"> <tr> <th rowspan="2"></th> <th rowspan="2">Straight Trucks</th> <th rowspan="2">Truck Tractors</th> <th rowspan="2">Trailers</th> <th rowspan="2">Hazmat Cargo Tank Trucks</th> <th rowspan="2">Hazmat Cargo Tank Trailers</th> <th rowspan="2">Motor Coach</th> <th colspan="2">School Bus</th> <th>Mini-bus</th> <th colspan="2">Van</th> <th colspan="3">Limousine</th> </tr> <tr> <th>1-8</th> <th>9-15</th> <th>16+</th> <th>16+</th> <th>1-8</th> <th>9-15</th> <th>1-8</th> <th>9-15</th> <th>16+</th> </tr> <tr> <td>OWNED</td> <td></td> <td></td> <td>1</td> <td>2</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TERM LEASED</td> <td></td> <td></td> <td>1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>TRIP LEASED</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>											Straight Trucks	Truck Tractors	Trailers	Hazmat Cargo Tank Trucks	Hazmat Cargo Tank Trailers	Motor Coach	School Bus		Mini-bus	Van		Limousine			1-8	9-15	16+	16+	1-8	9-15	1-8	9-15	16+	OWNED			1	2											TERM LEASED			1												TRIP LEASED																																	
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28. IS YOUR U.S. DOT NUMBER REGISTRATION CURRENTLY REVOKED BY THE FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION? Yes _____ No <input checked="" type="checkbox"/> X If Yes, enter your U.S. DOT Number. _____																																																																																																	
29. PLEASE ENTER NAME(S) OF SOLE PROPRIETOR(S), OFFICERS OR PARTNERS AND TITLES (e.g. PRESIDENT, TREASURER, GENERAL PARTNER, LIMITED PARTNER) 1. <u>ROYCE VARELA, OWNER</u> 2. _____ (Please print Name) (Please print Name)																																																																																																	
30. CERTIFICATION STATEMENT (to be completed by an authorized official) I, <u>HAILEY WHITE</u> certify that I am familiar with the Federal Motor Carrier Safety Regulations and/or Federal Hazardous Materials Regulations. (Please print Name) Under penalties of perjury, I declare that the information entered on this report is, to the best of my knowledge and belief, true, correct, and complete. Signature <u>HAILEY WHITE</u> Date <u>02/20/2023</u> Title <u>AGENT</u> (Please print)																																																																																																	

KCC Staff Exhibit 3

SMTRGA SM Transport
Invoice #: ROYCE#162
Ref #: 3

Origin: pratt ks
Destination: Ulysses, KS 67880, USA

Date: 12/10/23
Destination Ticket

Customer: Scoular

Amber Wave
1664 E 100 Road
Phillipsburg KS 67661
(785) 543-6719

OUTBOUND

Scale Ticket 34733

12/11/2023

Non-Negotiable

Animal Feed (wet)

Ship To: The Scoular Company

Customer
THE SCOULAR COMPANY
10801 Mastin Blvd Suite 800
Overland Park KS 66210

Account
SCOULAR

%
100.00%

Quantity
27.42 tons

Purchase Class
Unapplied/Hold

Carrier
Truck ID VARELA 1111

License #
Seals

Axles

Load # 46172-70
PO #

WEIGHTS

REMARKS / INSTRUCTION:

GROSS 87,180 lbs
12/11/2023 12:14:39PM

TARE 32,340 lbs
12/11/2023 11:37:14AM

NET 54,840 lbs

GRS tons 43.59 NET tons 27.42

GROSSWEIGHER
TAREWEIGHER

This is a memorandum, non negotiable, possession of which does not signify
that payment has or has not been consummated

Original

SMTRGA SM Transport **Origin:** pratt ks **Date:** 12/10/23 **Customer:** Scoular
Invoice #: ROYCE#162 **Destination:** Ulysses, KS 67880, **Destination**
Ref #: 3 **Ticket**

	Date	BOL #	Origin	Commodity	Destination	BOL#	Driver	Rate	Tons/BU	Net Pay
1	11-Dec	34748	Phillipsburg KS	WDG	Premier H Jhonson	14558	CV	47.00	26.86	\$1,262.42
2	11-Dec	34749	Phillipsburg KS	WDG	Premier H Jhonson	14557	CV		26.09	\$1,226.23
3	11-Dec	34733	Phillipsburg KS	WDG	Premier H Jhonson	14555	RN	47.00	27.42	\$1,288.74
4	13-Dec	50716	Pratt KS	WDG	Rocking H Ulysses	47799	RN	36.00	26.28	\$946.08
5	14-Dec	50762	Pratt KS	WDG	Rocking H Ulysses	47812	RN	36.00	25.91	\$932.76
6	14-Dec	50793	Pratt KS	WDG	Rocking H Ulysses	47821	RN	36.00	25.26	\$909.36
7	15-Dec	50813	Pratt KS	WDG	Rocking H Ulysses	47824	RN	36.00	26.42	\$951.12
8	16-Dec	50839	Pratt KS	WDG	Premier H Jhonson	14128	RN	38.00	26.56	\$1,009.28
9	16-Dec	50713	Pratt KS	WDG	Jhonson Rocking H	26168	OV	38.00	26.75	\$1,016.50
10	14-Dec	50757	Pratt KS	WDG	Jhonson Rocking H	26186	OV	38.00	26.60	\$1,010.80
11	16-Dec	50841	Pratt KS	WDG	Jhonson Rocking H	26207	OV	38.00	26.52	\$1,007.76
12	12-Dec	511808	Syracuse KS	FLAKES	Spandet Dairy	74242	EV	16.00	21.57	\$345.12
13	16-Dec	511849	Syracuse KS	FLAKES	Rathmourne Dairy	24559	EV	16.00	20.24	\$323.84
14	16-Dec	50852	Pratt KS	WDG	Jhonson Rocking H	26209	EV	38.00	26.68	\$1,013.84
15	16-Dec	50835	Pratt KS	WDG	Jhonson Rocking H	26206	EV	38.00	26.40	\$1,003.20
16	14-Dec	50791	Pratt KS	WDG	Rocking H Ulysses	47828	EV	36.00	26.82	\$965.52
17	14-Dec	50761	Pratt KS	WDG	Rocking H Ulysses	47810	EV	36.00	26.50	\$954.00
18	13-Dec	50741	Pratt KS	WDG	Rocking H Ulysses	47806	EV	36.00	27.01	\$972.36
19	13-Dec	50718	Pratt KS	WDG	Rocking H Ulysses	47800	EV	36.00	26.72	\$961.92
20	12-Dec	50651	Pratt KS	WDG	Jhonson Rocking H	26158	EV	38.00	26.34	\$1,000.92
21	11-Dec	34751	Phillipsburg KS	WDG	Premier H Jhonson	14561	EP	47.00	28.57	\$1,342.79
22	14-Dec	50755	Pratt KS	WDG	Jhonson Rocking H	26183	EP	38.00	28.57	\$1,085.66
23	15-Dec	50826	Pratt KS	WDG	Jhonson Rocking H	26204	EP	38.00	28.31	\$1,075.78
24	11-Dec	50646	Pratt KS	WDG	Jhonson Rocking H	26153	TV	38.00	28.12	\$1,068.56
25	17-Dec	50868	Pratt KS	WDG	Jhonson Rocking H	26212	TV	38.00	27.90	\$1,060.20
26	13-Dec	50744	Pratt KS	WDG	Jhonson Rocking H	26179	TV	38.00	27.92	\$1,060.96

DRIVER/VEHICLE EXAMINATION REPORT

Kansas Highway Patrol
Email: Khp.TruckInspection@KS.GOV
700 SW Jackson, Ste 704
Topeka, KS 66603
Phone: (785)296-7189 Fax: (785)296-2858

Report Number: KSHP04502271
Inspection Date: 11/09/2023
Start: 1:08 PM CT End: 2:25 PM CT
Inspection Level: I - Full
HM Inspection Type: None

Carrier: ROYCE VARELA
DBA: VARELA TRUCKING
804 4TH ST
GARDEN CITY, KS, 67846
USDOT: 2379357 Phone#: (620)290-0571
MC/MX#: Fax#: State#: Location: HODGEMAN COUNTY - 083
Highway: U283
County: Milepost: 82 Shipper: N/A
Email: Origin: GARDEN CITY,KS
Destination: PHILLIPSBURG,KS

Driver: VARELA, ROYCE
License#: K State: KS
Date of Birth: CoDriver: State:
License#: Date of Birth:
Bill of Lading: N/A
Cargo: EMPTY

VEHICLE IDENTIFICATION

Unit	Type	Make	Year	State	Plate	Equipment ID	VIN	GVWR	CVSA #	Issued #	OOS Sticker
1	TT	PTRB	1996	KS		11:11		9245 50000			
2	ST	EADU	2012	KS		1		7434 66000			

BRAKE ADJUSTMENTS

Axle #	1	2	3	4	5
Right	1 1/4	1 1/2	1 5/8	1 1/2	1 1/2
Left	1 1/2	1 1/2	1 5/8	2 1/2	1 1/2
Chamber	C-20	C-30	C-30	C-30	C-30

VIOLATIONS

Section	Type	Unit	OOS	Citation #	VerifyCrash	Violations Discovered
393.9H	F	1	N		N N	Inoperable head lamps: BOTH HIGHBEAMS INOP - DRIVER SIDE AND PASSENGER SIDE
393.11	F	1	N		N N	No or defective lighting devices or reflective material as required: NO REVERSE LAMP - 1 REQUIRED
393.47B	F	1	Y		U N	Mis-matched brake chambers on same axle: DRIVER SIDE AXLE 1 IS CLAMP TYPE 24 - PASSENGER SIDE AXLE 1 IS CLAMP TYPE 20
393.51	F	1	Y		U N	No or defective brake warning device: AIR DRAINED TO 0 PSI - NO LOW AIR WARNING LIGHT OR AUDIBLE
393.60C	F	1	N		N N	Damaged or discolored windshield: DRIVER SIDE WINDSHIELD HAS CRACKS INTERSECTED BY OTHER CRACKS
393.209E	F	1	N		N N	Power steering violations: PS FLUID LEAKING OUT SHAFT INPUT SEAL ARE OF PS GEARBOX
393.45DLUV	F	1	N		N N	Brake Connections with Leaks Under Vehicle: PASSENGER SIDE AXLE 1 - AUIBLE AND FELT LEAK ON AIR LINE TO CHAMBER BEHIND FRAME AT ELBOW AT CONNECTION - PROPER CONNECTION
393.47E	F	2	N		N N	Clamp or Roto type brake out-of-adjustment: DRIVER SIDE AXLE 4 MEASURED 2 1/2" - MAX FOR CLAMP TYPE 30 IS 2"
393.53B	F	2	N		N N	CMV manufactured after 10/19/94 has an automatic airbrake adjustment system that fails to compensate for wear
393.48A	F	2	N		N N	Inoperative/defective brakes: DRIVER SIDE AXLE 4 HAS CLEVIS PIN MISSING ON SLACK ADJUSTER ACTUATOR ROD
396.3A1BOS	F	2	Y		U N	BRAKES OUT OF SERVICE: The number of defective brakes is equal to or greater than 20 percent of the service brakes on the vehicle or combination: MISMATCHED CHAMBERS ON AXLE 1 AND AXLE 4 DRIVER SIDE OUT OF ADJUSTMENT
396.5B-HWSLIW	F	2	N		N N	Hubs - Wheel seal leaking - inner wheel: DRIVER SIDE AXLE 5 INNER WS LEAK BUT NOT CONTAMINATING BRAKE COMP AT THIS TIME
393.9	F	2	N		N N	Inoperable Required Lamp: TAG LAMP INOP - TAG IS PRESENT
393.100B	F	2	Y		U N	Leaking/spilling/blowing/falling cargo: DDG LAYING ON REAR OF TRAILER - NO SECUREMENT

HazMat: No HM transported

Placard:

Cargo Tank:



DRIVER/VEHICLE EXAMINATION REPORT

Kansas Highway Patrol
Email: Khp.TruckInspection@KS.GOV
700 SW Jackson, Ste 704
Topeka, KS 66603
Phone: (785)296-7189 Fax: (785)296-2858

Report Number: KSHP04502271
Inspection Date: 11/09/2023
Start: 1:08 PM CT End: 2:25 PM CT
Inspection Level: I - Full
HM Inspection Type: None

Special Checks: No data for special checks

Notes: NO KCC AUTHORITY, HOWEVER UNIT 2 IS EMPTY AND HEADING TO LOAD IN PHILLIPSBURG AND THEN TAKE WET DDG TO GARDEN OR SCOTT CITY FEEDLOT PHOTOS TAKEN OOS AT QUICK PICK IN JETMORE DRIVER ADVISED WIFE IS BRINGING HIM HIS SERVICE TRUCK WITH PARTS TO FIX OOS VIOLATIONSSHOWED DRIVER VIOLATIONS

* Pursuant to the authority contained in Title 49, CFR; K.S.A. 66-1,129; K.C.C. Reg. 82-4-3, I hereby declare the above marked unit(s) as "OUT OF SERVICE". No person and/or carrier shall permit and/or require the removal of the "OUT OF SERVICE" stickers or the operation of this motor vehicle until ALL out of service defects have been corrected. This Out of Service condition may result in the assessment of a Civil Penalty being issued against the Carrier indicated on this report. Driver Initials _____

* NOTE TO MECHANIC: The undersigned certifies that all mechanical defects listed on this report HAVE BEEN CORRECTED at the time of signature.
Signature Of Repairer X: _____ Facility: _____ Date: _____

**** DRIVER: THIS FORM IS REQUIRED TO BE RETURNED TO THE CARRIER BY REGULATION. **//** *CARRIER CERTIFICATION: All defects on this sheet must be corrected or acknowledged PRIOR TO RE-DISPATCH and then certified by a responsible carrier official who must sign below. RETURN THIS FORM WITHIN 15 DAYS to the Motor Carrier Division of the KANSAS HIGHWAY PATROL at the address listed at the top of this form.
Signature Of Motor Carrier X: _____ Title: _____ Date: _____

Report Prepared By: ID/Badge #:
A.S. Wagner 0450

Copy Received By:
ROYCE VARELA

X

X



ANNUAL VEHICLE INSPECTION REPORT

KCC Staff Exhibit 5

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
6479399	5
DATE 5-23-23	

MOTOR CARRIER OPERATOR <u>VARDA Trucking</u>	INSPECTOR'S NAME (PRINT OR TYPE) <u>Rayce Varda</u>
ADDRESS <u>804 N 42 St</u>	THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES
CITY, STATE, ZIP CODE <u>Garage, CA 12</u>	VEHICLE IDENTIFICATION (<input checked="" type="checkbox"/> AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER <u>0203</u>
VEHICLE TYPE <input checked="" type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	

VEHICLE COMPONENTS INSPECTED			
OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			1. BRAKE SYSTEM
<input checked="" type="checkbox"/>			a. Service Brakes
<input checked="" type="checkbox"/>			b. Parking Brake System
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors
<input checked="" type="checkbox"/>			d. Brake Hose
<input checked="" type="checkbox"/>			e. Brake Tubing
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device
<input checked="" type="checkbox"/>			g. Tractor Protection Valve
<input checked="" type="checkbox"/>			h. Air Compressor
<input checked="" type="checkbox"/>			i. Electric Brakes
<input checked="" type="checkbox"/>			j. Hydraulic Brakes
<input checked="" type="checkbox"/>			k. Vacuum Systems
<input checked="" type="checkbox"/>			l. Antilock Brake System
<input checked="" type="checkbox"/>			m. Automatic Brake Adjusters
<input checked="" type="checkbox"/>			2. COUPLING DEVICES
<input checked="" type="checkbox"/>			a. Fifth Wheels
<input checked="" type="checkbox"/>			b. Pintle Hooks
<input checked="" type="checkbox"/>			c. Drawbar/Towbar Eye
<input checked="" type="checkbox"/>			d. Drawbar/Towbar Tongue
<input checked="" type="checkbox"/>			e. Safety Devices
<input checked="" type="checkbox"/>			f. Saddle-Mounts
<input checked="" type="checkbox"/>			3. EXHAUST SYSTEM
<input checked="" type="checkbox"/>			a. No leaks forward of/ directly below the driver/ sleeper compartment.
<input checked="" type="checkbox"/>			b. Bus: No leaking/ discharging in violation of standard.
<input checked="" type="checkbox"/>			c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.
<input checked="" type="checkbox"/>			4. FUEL SYSTEM
<input checked="" type="checkbox"/>			a. No visible leak.
<input checked="" type="checkbox"/>			b. Fuel Tank Filler Cap
<input checked="" type="checkbox"/>			c. Fuel tank securely attached.
<input checked="" type="checkbox"/>			5. LIGHTING DEVICES
<input checked="" type="checkbox"/>			All required lights/reflectors operable.
<input checked="" type="checkbox"/>			6. SAFE LOADING
<input checked="" type="checkbox"/>			a. Vehicle parts, load, dunnage, spare tire, etc., secured.
<input checked="" type="checkbox"/>			b. Front End Structure
<input checked="" type="checkbox"/>			c. Intermodal Container Securement Devices
<input checked="" type="checkbox"/>			7. STEERING MECHANISM
<input checked="" type="checkbox"/>			a. Steering Wheel Free Play
<input checked="" type="checkbox"/>			b. Steering Column
<input checked="" type="checkbox"/>			c. Front Axle Beam/All Other Steering Components
<input checked="" type="checkbox"/>			d. Steering Gear Box
<input checked="" type="checkbox"/>			e. Pitman Arm
<input checked="" type="checkbox"/>			f. Power Steering
<input checked="" type="checkbox"/>			g. Ball and Socket Joints
<input checked="" type="checkbox"/>			h. Tie Rods and Drag Links
<input checked="" type="checkbox"/>			i. Nuts
<input checked="" type="checkbox"/>			j. Steering System
<input checked="" type="checkbox"/>			8. SUSPENSION
<input checked="" type="checkbox"/>			a. Axle Positioning Parts
<input checked="" type="checkbox"/>			b. Spring Assembly
<input checked="" type="checkbox"/>			c. Torque, Radius or Tracking Components
<input checked="" type="checkbox"/>			9. FRAME
<input checked="" type="checkbox"/>			a. Frame Members
<input checked="" type="checkbox"/>			b. Tire and Wheel Clearance
<input checked="" type="checkbox"/>			c. Adjustable Axle Assemblies (Sliding Subframes)
<input checked="" type="checkbox"/>			10. TIRES
<input checked="" type="checkbox"/>			a. Steer-Axle Tires
<input checked="" type="checkbox"/>			b. All Other Tires
<input checked="" type="checkbox"/>			c. Speed-Restricted Tires
<input checked="" type="checkbox"/>			11. WHEELS AND RIMS
<input checked="" type="checkbox"/>			a. Lock or Side Ring
<input checked="" type="checkbox"/>			b. Wheels and Rims
<input checked="" type="checkbox"/>			c. Fasteners
<input checked="" type="checkbox"/>			d. Welds
<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>			No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			No missing, damaged, or inoperable wipers.
<input checked="" type="checkbox"/>			14. MOTORCOACH SEATS
<input checked="" type="checkbox"/>			Seats securely fastened to the vehicle structure.
<input checked="" type="checkbox"/>			15. REAR IMPACT GUARD
<input checked="" type="checkbox"/>			In place, securely attached, proper size, proper placement (see 393.86).
<input checked="" type="checkbox"/>			16. OTHER
<input checked="" type="checkbox"/>			List any other condition(s) which may prevent safe operation of this vehicle.

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK ☒ NEEDS REPAIR ☒ NA IF ITEMS DO NOT APPLY. REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

VEHICLE HISTORY RECORD

REPORT
NUMBER

FLEET UNIT NUMBER

61743982 89

DATE 3-12-23

MOTOR CARRIER OPERATOR

VARELA Trucking

ADDRESS

804 N 4th St

CITY, STATE, ZIP CODE

Gardner, KS 67846

VEHICLE TYPE ☒ TRACTOR ☐ TRAILER ☐ TRUCK ☐ BUS☐ (OTHER)

INSPECTOR'S NAME (PRINT OR TYPE)

Rene Varela

THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19.

☒ YESVEHICLE IDENTIFICATION (if AND COMPLETE) ☐ LIC. PLATE NO. ☒ VIN ☐ OTHER

[REDACTED] 3198

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
			1. BRAKE SYSTEM				6. SAFE LOADING				12. WINDSHIELD GLAZING
/			a. Service Brakes	/			a. Vehicle parts, load, dunnage, spare tire, etc., secured.	/			No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
/			b. Parking Brake System	/			b. Front End Structure	/			13. WINDSHIELD WIPERS
/			c. Brake Drums or Rotors	/			c. Intermodal Container Securement Devices	/			No missing, damaged, or inoperable wipers.
/			d. Brake Hose	/			7. STEERING MECHANISM	/			14. MOTORCOACH SEATS
/			e. Brake Tubing	/			a. Steering Wheel Free Play	/			Seats securely fastened to the vehicle structure.
/			f. Low Pressure Warning Device	/			b. Steering Column	/			15. REAR IMPACT GUARD
/			g. Tractor Protection Valve	/			c. Front Axle Beam/All Other Steering Components	/			In place, securely attached, proper size, proper placement (see 393.86).
/			h. Air Compressor	/			d. Steering Gear Box	/			16. OTHER
/			i. Electric Brakes	/			e. Pitman Arm	/			List any other condition(s) which may prevent safe operation of this vehicle.
/			j. Hydraulic Brakes	/			f. Power Steering	/			
/			k. Vacuum Systems	/			g. Ball and Socket Joints	/			
/			l. Antilock Brake System	/			h. Tie Rods and Drag Links	/			
/			m. Automatic Brake Adjusters	/			i. Nuts	/			
			2. COUPLING DEVICES				8. SUSPENSION				
/			a. Fifth Wheels	/			a. Axle Positioning Parts	/			
/			b. Pintle Hooks	/			b. Spring Assembly	/			
/			c. Drawbar/Towbar Eye	/			c. Torque, Radius or Tracking Components	/			
/			d. Drawbar/Towbar Tongue	/			9. FRAME	/			
/			e. Safety Devices	/			a. Frame Members	/			
/			f. Saddle-Mounts	/			b. Tire and Wheel Clearance	/			
			3. EXHAUST SYSTEM				10. TIRES				
/			a. No leaks forward of/ directly below the driver/sleeper compartment.	/			a. Steer-Axle Tires	/			
/			b. Bus: No leaking/ discharging in violation of standard.	/			b. All Other Tires	/			
/			c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.	/			c. Speed-Restricted Tires	/			
			4. FUEL SYSTEM				11. WHEELS AND RIMS				
/			a. No visible leak.	/			a. Lock or Side Ring	/			
/			b. Fuel Tank Filler Cap	/			b. Wheels and Rims	/			
/			c. Fuel tank securely attached.	/			c. Fasteners	/			
			5. LIGHTING DEVICES				d. Welds	/			
/			All required lights/reflectors operable.	/				/			

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: / OK, X NEEDS REPAIR, NA IF ITEMS DO NOT APPLY, _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
6179995	501
DATE 2-21-23	

MOTOR CARRIER OPERATOR VARELA Trucking ADDRESS 804 N 7th St CITY, STATE, ZIP CODE Garden City KS 67846 VEHICLE TYPE <input checked="" type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTOR'S NAME (PRINT OR TYPE) Royce Varela THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES <div style="background-color: black; width: 150px; height: 40px; margin: 5px 0;"></div> E NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 6238
---	---

VEHICLE COMPONENTS INSPECTED											
OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			a. Service Brakes	<input checked="" type="checkbox"/>			a. Vehicle parts, load, dunnage, spare tire, etc., secured.	<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>			b. Parking Brake System	<input checked="" type="checkbox"/>			b. Front End Structure	<input checked="" type="checkbox"/>			No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors	<input checked="" type="checkbox"/>			c. Intermodal Container Securement Devices	<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			d. Brake Hose	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			No missing, damaged, or inoperable wipers.
<input checked="" type="checkbox"/>			e. Brake Tubing	<input checked="" type="checkbox"/>			7. STEERING MECHANISM	<input checked="" type="checkbox"/>			14. MOTORCOACH SEATS
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device	<input checked="" type="checkbox"/>			a. Steering Wheel Free Play	<input checked="" type="checkbox"/>			Seats securely fastened to the vehicle structure.
<input checked="" type="checkbox"/>			g. Tractor Protection Valve	<input checked="" type="checkbox"/>			b. Steering Column	<input checked="" type="checkbox"/>			15. REAR IMPACT GUARD
<input checked="" type="checkbox"/>			h. Air Compressor	<input checked="" type="checkbox"/>			c. Front Axle Beam/All Other Steering Components	<input checked="" type="checkbox"/>			In place, securely attached, proper size, proper placement (see 393.86).
<input checked="" type="checkbox"/>			i. Electric Brakes	<input checked="" type="checkbox"/>			d. Steering Gear Box	<input checked="" type="checkbox"/>			16. OTHER
<input checked="" type="checkbox"/>			j. Hydraulic Brakes	<input checked="" type="checkbox"/>			e. Pitman Arm	<input checked="" type="checkbox"/>			List any other condition(s) which may prevent safe operation of this vehicle.
<input checked="" type="checkbox"/>			k. Vacuum Systems	<input checked="" type="checkbox"/>			f. Power Steering	<input checked="" type="checkbox"/>			LIKE NEW
<input checked="" type="checkbox"/>			l. Antilock Brake System	<input checked="" type="checkbox"/>			g. Ball and Socket Joints	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			m. Automatic Brake Adjusters	<input checked="" type="checkbox"/>			h. Tie Rods and Drag Links	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. Fifth Wheels	<input checked="" type="checkbox"/>			i. Nuts	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Pintle Hooks	<input checked="" type="checkbox"/>			j. Steering System	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Drawbar/Towbar Eye	<input checked="" type="checkbox"/>			8. SUSPENSION	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			d. Drawbar/Towbar Tongue	<input checked="" type="checkbox"/>			a. Axle Positioning Parts	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			e. Safety Devices	<input checked="" type="checkbox"/>			b. Spring Assembly	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			f. Saddle-Mounts	<input checked="" type="checkbox"/>			c. Torque, Radius or Tracking Components	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. No leaks forward of/ directly below the driver/sleeper compartment.	<input checked="" type="checkbox"/>			9. FRAME	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Bus: No leaking/ discharging in violation of standard.	<input checked="" type="checkbox"/>			a. Frame Members	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.	<input checked="" type="checkbox"/>			b. Tire and Wheel Clearance	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			c. Adjustable Axle Assemblies (Sliding Subframes)	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. No visible leak.	<input checked="" type="checkbox"/>			10. TIRES	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Fuel Tank Filler Cap	<input checked="" type="checkbox"/>			a. Steer-Axle Tires	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Fuel tank securely attached.	<input checked="" type="checkbox"/>			b. All Other Tires	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			c. Speed-Restricted Tires	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. All required lights/reflectors operable.	<input checked="" type="checkbox"/>			11. WHEELS AND RIMS	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			a. Lock or Side Ring	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			b. Wheels and Rims	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			c. Fasteners	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			d. Welds	<input checked="" type="checkbox"/>			

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK ☒ NEEDS REPAIR ☒ NA IF ITEMS DO NOT APPLY. _____ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD

REPORT
NUMBER

FLEET UNIT NUMBER

DATE

137510 1111
1-24-23

MOTOR CARRIER OPERATOR

Varela Trucking

ADDRESS

804 N 1st St

CITY, STATE, ZIP CODE

Gardner, KS 67526

VEHICLE TYPE ☒ TRACTOR ☐ TRAILER ☐ TRUCK ☐ BUS☐ (OTHER)

INSPECTOR'S NAME (PRINT OR TYPE)

R. J. Varela

THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19.

☒ YES

VEHICLE IDENTIFICATION

PLATE NO. ☒ VIN ☐ OTHER

7245

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			1. BRAKE SYSTEM	<input checked="" type="checkbox"/>			12. WINDSHIELD GLAZING	<input checked="" type="checkbox"/>			No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
<input checked="" type="checkbox"/>			a. Service Brakes	<input checked="" type="checkbox"/>			a. Vehicle parts, load, dunnage, spare tire, etc., secured.	<input checked="" type="checkbox"/>			13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			b. Parking Brake System	<input checked="" type="checkbox"/>			b. Front End Structure	<input checked="" type="checkbox"/>			No missing, damaged, or inoperable wipers.
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors	<input checked="" type="checkbox"/>			c. Intermodal Container Securement Devices	<input checked="" type="checkbox"/>			14. MOTORCOACH SEATS
<input checked="" type="checkbox"/>			d. Brake Hose	<input checked="" type="checkbox"/>			7. STEERING MECHANISM	<input checked="" type="checkbox"/>			Seats securely fastened to the vehicle structure.
<input checked="" type="checkbox"/>			e. Brake Tubing	<input checked="" type="checkbox"/>			a. Steering Wheel Free Play	<input checked="" type="checkbox"/>			15. REAR IMPACT GUARD
<input checked="" type="checkbox"/>			f. Low Pressure Warning Device	<input checked="" type="checkbox"/>			b. Steering Column	<input checked="" type="checkbox"/>			In place, securely attached, proper size, proper placement (see 393.86).
<input checked="" type="checkbox"/>			g. Tractor Protection Valve	<input checked="" type="checkbox"/>			c. Front Axle Beam/All Other Steering Components	<input checked="" type="checkbox"/>			16. OTHER
<input checked="" type="checkbox"/>			h. Air Compressor	<input checked="" type="checkbox"/>			d. Steering Gear Box	<input checked="" type="checkbox"/>			List any other condition(s) which may prevent safe operation of this vehicle.
<input checked="" type="checkbox"/>			i. Electric Brakes	<input checked="" type="checkbox"/>			e. Pitman Arm	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			j. Hydraulic Brakes	<input checked="" type="checkbox"/>			f. Power Steering	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			k. Vacuum Systems	<input checked="" type="checkbox"/>			g. Ball and Socket Joints	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			l. Antilock Brake System	<input checked="" type="checkbox"/>			h. Tie Rods and Drag Links	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			m. Automatic Brake Adjusters	<input checked="" type="checkbox"/>			i. Nuts	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			2. COUPLING DEVICES	<input checked="" type="checkbox"/>			j. Steering System	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. Fifth Wheels	<input checked="" type="checkbox"/>			8. SUSPENSION	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Pintle Hooks	<input checked="" type="checkbox"/>			a. Axle Positioning Parts	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Drawbar/Towbar Eye	<input checked="" type="checkbox"/>			b. Spring Assembly	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			d. Drawbar/Towbar Tongue	<input checked="" type="checkbox"/>			c. Torque, Radius or Tracking Components	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			e. Safety Devices	<input checked="" type="checkbox"/>			9. FRAME	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			f. Saddle-Mounts	<input checked="" type="checkbox"/>			a. Frame Members	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			3. EXHAUST SYSTEM	<input checked="" type="checkbox"/>			b. Tire and Wheel Clearance	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. No leaks forward of/ directly below the driver/sleeper compartment.	<input checked="" type="checkbox"/>			c. Adjustable Axle Assemblies (Sliding Subframes)	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Bus: No leaking/ discharging in violation of standard.	<input checked="" type="checkbox"/>			10. TIRES	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.	<input checked="" type="checkbox"/>			a. Steer-Axle Tires	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			4. FUEL SYSTEM	<input checked="" type="checkbox"/>			b. All Other Tires	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			a. No visible leak.	<input checked="" type="checkbox"/>			c. Speed-Restricted Tires	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			b. Fuel Tank Filler Cap	<input checked="" type="checkbox"/>			11. WHEELS AND RIMS	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			c. Fuel tank securely attached.	<input checked="" type="checkbox"/>			a. Lock or Side Ring	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			5. LIGHTING DEVICES	<input checked="" type="checkbox"/>			b. Wheels and Rims	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>			All required lights/reflectors operable.	<input checked="" type="checkbox"/>			c. Fasteners	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>			d. Welds	<input checked="" type="checkbox"/>			

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION. ☒ OK ☒ NEEDS REPAIR ☒ NA IF ITEMS DO NOT APPLY. REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD	
REPORT NUMBER	FLEET UNIT NUMBER
64793986	1
DATE 1-27-23	

MOTOR CARRIER OPERATOR VARELA TRUCKING ADDRESS 804 N 4th St CITY, STATE, ZIP CODE Garden City, KS 67826 VEHICLE TYPE <input type="checkbox"/> TRACTOR <input checked="" type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER)	INSPECTOR'S NAME (PRINT OR TYPE) Royce Varela THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES <div style="background-color: black; width: 150px; height: 40px; margin-top: 10px;"></div> PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 1201
--	--

VEHICLE COMPONENTS INSPECTED			
OK	NEEDS REPAIR	REPAIRED DATE	ITEM
1. BRAKE SYSTEM			
✓			a. Service Brakes
✓		N/A	b. Parking Brake System
✓			c. Brake Drums or Rotors
✓			d. Brake Hose
✓			e. Brake Tubing
		N/A	f. Low Pressure Warning Device
		N/A	g. Tractor Protection Valve
		N/A	h. Air Compressor
		N/A	i. Electric Brakes
		N/A	j. Hydraulic Brakes
		N/A	k. Vacuum Systems
✓			l. Antilock Brake System
✓			m. Automatic Brake Adjusters
2. COUPLING DEVICES			
✓			a. Fifth Wheels
✓			b. Pintle Hooks
✓			c. Drawbar/Towbar Eye
✓			d. Drawbar/Towbar Tongue
✓			e. Safety Devices
✓			f. Saddle-Mounts
3. EXHAUST SYSTEM			
		N/A	a. No leaks forward of/ directly below the driver/ sleeper compartment.
		N/A	b. Bus: No leaking/ discharging in violation of standard.
		N/A	c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.
4. FUEL SYSTEM			
		N/A	a. No visible leak.
		N/A	b. Fuel Tank Filler Cap
		N/A	c. Fuel tank securely attached.
5. LIGHTING DEVICES			
✓			All required lights/reflectors operable.
6. SAFE LOADING			
✓			a. Vehicle parts, load, dunnage, spare tire, etc., secured.
✓			b. Front End Structure
✓			c. Intermodal Container Securement Devices
7. STEERING MECHANISM			
		N/A	a. Steering Wheel Free Play
		N/A	b. Steering Column
8. WINDSHIELD GLAZING			
		N/A	No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
9. WINDSHIELD WIPERS			
		N/A	No missing, damaged, or inoperable wipers.
10. MOTORCOACH SEATS			
		N/A	Seats securely fastened to the vehicle structure.
11. REAR IMPACT GUARD			
			In place, securely attached, proper size, proper placement (see 393.86).
12. OTHER			
			List any other condition(s) which may prevent safe operation of this vehicle.
13. ADJUSTABLE AXLE ASSEMBLIES (Sliding Subframes)			
14. TIRES			
			a. Steer-Axle Tires
			b. All Other Tires
			c. Speed-Restricted Tires
15. WHEELS AND RIMS			
			a. Lock or Side Ring
			b. Wheels and Rims
			c. Fasteners
			d. Welds

will not have new annual until fixed.

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

VEHICLE HISTORY RECORD

REPORT
NUMBER

FLEET UNIT NUMBER

61793981 2

T13

DATE 1-20-23

MOTOR CARRIER OPERATOR

VARELA Trucking

ADDRESS

807 N 4th St

CITY, STATE, ZIP CODE

Guthrie, KS 67846

VEHICLE TYPE ☐ TRACTOR ☒ TRAILER ☐ TRUCK ☐ BUS
☐ (OTHER)

INSPECTOR'S NAME (PRINT OR TYPE)

Royce Varela

THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19.

☒ YESVEHICLE IDENTIFICATION (IF AND COMPLETE) ☐ LIC. PLATE NO. ☒ VIN ☐ OTHER

[REDACTED] 6039

VEHICLE COMPONENTS INSPECTED

OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM	OK	NEEDS REPAIR	REPAIRED DATE	ITEM
<input checked="" type="checkbox"/>			1. BRAKE SYSTEM	<input checked="" type="checkbox"/>			5. SAFE LOADING				12. WINDSHIELD GLAZING
<input checked="" type="checkbox"/>		N/A	a. Service Brakes	<input checked="" type="checkbox"/>			a. Vehicle parts, load, dunnage, spare tire, etc., secured.			N/A	No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions).
<input checked="" type="checkbox"/>			b. Parking Brake System	<input checked="" type="checkbox"/>			b. Front End Structure				13. WINDSHIELD WIPERS
<input checked="" type="checkbox"/>			c. Brake Drums or Rotors	<input checked="" type="checkbox"/>			c. Intermodal Container Securement Devices			N/A	No missing, damaged, or inoperable wipers.
<input checked="" type="checkbox"/>			d. Brake Hose				7. STEERING MECHANISM				14. MOTORCOACH SEATS
<input checked="" type="checkbox"/>		N/A	e. Brake Tubing				a. Steering Wheel Free Play			N/A	Seats securely fastened to the vehicle structure.
		N/A	f. Low Pressure Warning Device				b. Steering Column				15. REAR IMPACT GUARD
		N/A	g. Tractor Protection Valve				c. Front Axle Beam/All Other Steering Components				In place, securely attached, proper size, proper placement (see 393.86).
		N/A	h. Air Compressor				d. Steering Gear Box				16. OTHER
		N/A	i. Electric Brakes				e. Pitman Arm				List any other condition(s) which may prevent safe operation of this vehicle.
		N/A	j. Hydraulic Brakes				f. Power Steering				
		N/A	k. Vacuum Systems				g. Ball and Socket Joints				
		N/A	l. Antilock Brake System				h. Tie Rods and Drag Links				
		N/A	m. Automatic Brake Adjusters				i. Nuts				
		N/A	2. COUPLING DEVICES				j. Steering System				
		N/A	a. Fifth Wheels				8. SUSPENSION				
		N/A	b. Pintle Hooks				a. Axle Positioning Parts				
		N/A	c. Drawbar/Towbar Eye				b. Spring Assembly				
		N/A	d. Drawbar/Towbar Tongue				c. Torque, Radius or Tracking Components				
		N/A	e. Safety Devices				9. FRAME				
		N/A	f. Saddle-Mounts				a. Frame Members				
		N/A	3. EXHAUST SYSTEM				b. Tire and Wheel Clearance				
		N/A	a. No leaks forward of/ directly below the driver/ sleeper compartment.				c. Adjustable Axle Assemblies (Sliding Subframes)				
		N/A	b. Bus: No leaking/ discharging in violation of standard.				10. TIRES				
		N/A	c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle.				a. Steer-Axle Tires				
		N/A	4. FUEL SYSTEM				b. All Other Tires				
		N/A	a. No visible leak.				c. Speed-Restricted Tires				
		N/A	b. Fuel Tank Filler Cap				11. WHEELS AND RIMS				
		N/A	c. Fuel tank securely attached.				a. Lock or Side Ring				
		N/A	5. LIGHTING DEVICES				b. Wheels and Rims				
		N/A	All required lights/reflectors operable.				c. Fasteners				
		N/A					d. Welds				

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☐ OK ☒ NEEDS REPAIR ☐ NA IF ITEMS DO NOT APPLY.

REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.

KCC Staff Exhibit 6

SMTRGA SM Transport
Invoice #: ROYCE#153
Ref #: 7

Origin: phillipsburgs ks
Destination: ulysses ks

Date: 11/05/23
Origin Ticket

Customer: Scoular

Amber Wave
1664 E 100 Road
Phillipsburg, KS 67661
(785) 543-6719

OUTBOUND

Scale Ticket 33435

11/10/2023

Non-Negotiable

Ship To: The Scoular Company

Animal Feed (wet)

Customer
The Scoular Company
10801 Mastin Blvd Suite 800
Overland Park KS 66210

Account
SCoular

%
100.00%

Quantity
28.81 tons

Purchase Class
Unapplied/Hold

Carrier
Truck ID VARELA 1111

License #
Seals

Axles

Load # 43863-3
PO #

WEIGHTS

REMARKS / INSTRUCTION:

GROSS 89,680 lbs
11/10/2023 1:15:42AM

TARE 32,060 lbs
11/9/2023 6:12:42PM

NET 57,620 lbs

GHS tons 44.84 NET TONS 28.81

GROSSWEIGHERS scale
TARE WEIGHERS scale

This is a memorandum, non negotiable, possession of which does not signify that payment has or has not been consummated.

Original



ROCKING HEIFER, LLC.

Ulysses

439 E. Road 4 • Ulysses, KS 67880
620-356-5349

No. 47356

Date 11/10/23
Commodity Wet
Driver T. J. J.
From Phillipsburg

Test _____ ON ☐ OFF ☐
Moisture _____
Price _____
Amount _____
Weigher _____

KCC Staff Exhibit 7

6-19/6-24

Week Ending _____

Name Royce Varela

MON.	A	<input checked="" type="checkbox"/>		9:00am
	M	<input type="checkbox"/>		
	P	<input type="checkbox"/>		
TUE.	A	<input type="checkbox"/>		12:30pm
	M	<input type="checkbox"/>		
	P	<input type="checkbox"/>		
WED.	A	<input type="checkbox"/>		no work
	M	<input type="checkbox"/>		
	P	<input type="checkbox"/>		
THU.	A	<input type="checkbox"/>		no work
	M	<input type="checkbox"/>		
	P	<input type="checkbox"/>		
FRI.	A	<input type="checkbox"/>		no work
	M	<input type="checkbox"/>		
	P	<input type="checkbox"/>		
SAT.	A	<input type="checkbox"/>		no work
	M	<input type="checkbox"/>		
	P	<input type="checkbox"/>		
SUN.	A	<input type="checkbox"/>		
	M	<input type="checkbox"/>		
	P	<input type="checkbox"/>		

SIGNATURE _____

KCC © 2000

Vehicle Log

1

KCC Staff Exhibit 8

Daily Transactions 06/01/2023 - 06/30/2023 Vehicle VARELA 89

Huber Sand Inc
395 Industrial Drive
Garden City, KS 67846

Vehicle VARELA 89
Account KOSS-CIM-OTHER - KOSS-CIMARRON-OTHER HAUL
Job Site (No Entry)
Material 3/4 CR - 3/4 CRUSHED ROCK

<u>Tran #</u>	<u>Scale #</u>	<u>Date/Time</u>	<u>Net Tons</u>
145367	1	06/19/2023 08:32	19.12 tn
Material Total			19.12 tn

Material 3/4 MINUS-40/#8 - 3/4 MINUS (40 ON #8)

<u>Tran #</u>	<u>Scale #</u>	<u>Date/Time</u>	<u>Net Tons</u>
144531	1	06/08/2023 10:18	25.72 tn
144563	1	06/08/2023 11:39	25.76 tn
145395	1	06/19/2023 11:27	26.78 tn
Material Total			78.26 tn
Job Site Total			97.38 tn
Account Total			97.38 tn

Account VEN-FINNEY CO - VENTURE- FINNEY COUNTY
Job Site (No Entry)
Material 3/4 MINUS-40/#8 - 3/4 MINUS (40 ON #8)

<u>Tran #</u>	<u>Scale #</u>	<u>Date/Time</u>	<u>Net Tons</u>
145676	1	06/21/2023 12:22	27.41 tn
145703	1	06/21/2023 13:54	26.18 tn
145718	1	06/21/2023 15:29	29.27 tn
145745	1	06/21/2023 17:06	27.47 tn
145896	1	06/23/2023 08:55	29.70 tn
145938	1	06/23/2023 10:33	26.47 tn
145971	1	06/23/2023 12:08	25.20 tn
145998	1	06/23/2023 13:41	27.09 tn
146019	1	06/23/2023 15:16	29.33 tn
146044	1	06/23/2023 16:55	28.22 tn
146062	1	06/24/2023 09:09	28.10 tn
146082	1	06/24/2023 10:41	27.06 tn
146097	1	06/24/2023 12:17	27.82 tn
146151	1	06/26/2023 10:57	26.74 tn
146297	1	06/27/2023 08:47	28.79 tn
146318	1	06/27/2023 10:12	27.69 tn
146347	1	06/27/2023 11:42	28.58 tn
146376	1	06/27/2023 13:07	28.90 tn
146411	1	06/27/2023 15:00	29.13 tn
146441	1	06/27/2023 16:35	26.12 tn
146469	1	06/28/2023 08:16	28.52 tn
146531	1	06/28/2023 10:36	27.28 tn
146557	1	06/28/2023 12:06	28.49 tn
146628	1	06/28/2023 16:25	29.51 tn
146676	1	06/29/2023 08:31	28.71 tn
146704	1	06/29/2023 09:57	28.80 tn
146723	1	06/29/2023 11:21	28.79 tn
146746	1	06/29/2023 12:55	27.82 tn
146772	1	06/29/2023 14:20	27.33 tn
146792	1	06/29/2023 15:45	26.09 tn
146826	1	06/29/2023 17:08	27.76 tn

CERTIFICATE OF SERVICE

24-TRAM-587-PEN

I, the undersigned, certify that a true and correct copy of the above and foregoing Notice of Filing of Staff's Public Hearing Exhibits was served via electronic service this 15th day of March, 2024, to the following:

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ROYCE VARELA, OWNER
ROYCE VARELA
D/B/A VARELA TRUCKING
804 4TH STREET
GARDEN CITY, KS 67846
rvtrucking_13@icloud.com

/s/ Ann Murphy

Ann Murphy