

BEFORE THE STATE CORPORATION COMMISSION  
OF THE STATE OF KANSAS

In the Matter of the Investigation of **Kings** )  
**Home Delivery LLC, of Wichita, KS,** )  
Regarding the Violation(s) of the Motor )  
Carrier Safety Statutes, Rules and Regulations ) Docket No. 22-TRAM-320-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 5, 2022, Kings Home Delivery LLC, received valid service of the Penalty Order issued by the Commission on February 1, 2022.

Dated this 8th day of February, 2022.

Respectfully submitted,

*/s/ Ahsan A. Latif*

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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](mailto:a.latif@kcc.ks.gov) (Email)

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. <i>22-320 Rev</i></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>CHRISTOPHER DARNELL, OWNER KINGS HOME DELIVERY LLC 634 S LONGFELLOW WICHITA, KS 67207</p>	<p>A. Signature <b>X</b></p>	<p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>C. Date of Delivery <i>2/5/22</i></p>														
	<p>B. Received by (Printed Name)</p>	<p>Address different from item 1? <input type="checkbox"/> Yes or delivery address below: <input type="checkbox"/> No</p>														
<p>9590 9402 2218 6193 7621 51</p> <p>Article Number (Transfer from service label) <b>7021 0950 0000 0673 3627</b></p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery all Restricted Delivery</td> <td></td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery all Restricted Delivery	
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PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt