RECEIVED

MAR 13 2019

Montana Public Service Commission Motor Carrier Annual Report

MONT. P.S. COMMISSION

Report must be filed on or before March 31st each year

All annual report filings must be signed by an owner or officer of the company and notarized by a notary public. (oath page)

Carrier Name (EXACTLY AS SHOWN ON PSC	DISPOSALS	S INC dba DILL	ON DISPOSA	L SERVICE
AUTHORITY)				
PSC Number	3627			See General Instruction # 5
Soo Gor	neral Instruction #	4		
Reporting Year	leral instruction #			
	mm/yyyy to mm/yyyy format Reporting Period (if other than calendar year) 7 / 2017 to 6 / 2018			
CARRIER ADDRESS	PO BOX 133	34	***************************************	
	City DILLON	Si	tate MT	Zip 59725
Check YES X (address at which you now receive monthly notice and other materials from the PSC)?				
YES NO	Check If the an	swer to the above cha	question is No nged to that sl	O do you want your official address hown above?
Carrier e-mail address				optional
,	Pers	son Completing Repor	t	
Name	WM BURGDORF	ER & ASSOCIATE	ES PC	
Phone Number	(406)683-61	19		7
E-mail Address				optional
Check One				
YES	X DID			REGULATED INTRASTATE
NO If NO See Gene		SENGERS, HOUSE FILING PERIOD?	EHOLD GOOD	S OR GARBAGE DURING
instruction #3		FILING PERIOD!		
		Montana Public S		nission

Montana Public Service Commission
Transportation Division
1701 Prospect Avenue / PO Box 202601
Helena, MT 59620-2601

	3627	
ear	INTRASTATE REVENUES	
Γ	Household Goods	
	Passengers Passengers	
<u> </u>	Class C	
r	Class D (Garbage)	\$927,3
ſ	TOTAL INTRASTATE REVENUE	\$927,3
1		
	INCOME STATEMENT Operating Revenue	
	Intrastate Revenue	¢027.2
	Interstate Revenue	\$927,3
	Non-Regulated Revenue	Ф О 2
	TOTAL REVENUE	\$9,3 \$936,6 9
	Operating Expenses	\$350,03
	Salaries & Wages	
	Salaries—Officers & Supervisory Personnel	\$202,0
	Clerical & Administrative	
-	Drivers & Helpers	\$14,4 \$196,2
	Cargo Handlers	Φ190,∠
	Vehicle Repair & Service	
	Other Labor	¢2.7
	Fringes	\$3,7
	Payroll Taxes	\$63,29
	Workman's Compensation	\$18,5
	Pension & Welfare Expenses	\$3,6
	Operating Supplies & Expenses	φ3,02
	Fuel for Motor Vehicles	\$54,92
	Vehicle Parts	\$32,66
	Other Operating Supplies & Expenses	\$32,00
	Operating Taxes & Licenses	ΨΟΤ,Ο
	Gas, Fuel and Oil Taxes	
	Real Estate & Personal Property Taxes	
	Vehicle License & Registration Fees	\$3,8
	Other Taxes	\$7,72
	Depreciation & Amortization	Ψ1,12
	Revenue Equipment	\$85,45
	Other	ΨΟΟ, ΤΟ
	Purchased Transportation	
m	With Driver	······································
	Without Driver	······································
	Other Purchased Transportation	***************************************
	Office/General	
	Insurance	\$58,19
	Communications & Utilities	\$9,46
	Building & Office Equipment Rents	\$18,50
	General Supplies & Expenses	\$9,54
	Miscellaneous Expenses	\$34,30
	Gain on Disposition of Operating Assets	Ψ0-1,00
T	oss on Disposition of Operating Asset (enter as positive number)	
	TOTAL EXPENSES	\$853,51
		<u> </u>
	AND	

Name	DISPOSALS INC dba DILLON DISPOSAL SERVICE	
PSC#	3627	
Year		
	BALANCE SHEET	
	(ASSETS)	
	CURRENT ASSETS	
*	Cash & Working Funds	\$30,768
	Special Deposits	
	Temporary Cash Investments	\$262,121
	Notes Receivable	\$179,426
	Accounts Receivable	
	Prepayments	
	Materials & Supplies	
	Other Current Assets	
	TOTAL CURRENT ASSETS	<u>\$472,315</u>
	TANGIBLE PROPERTY	
	Carrier Operating Property	\$1,146,947
	Less: Reserve for Depreciation (enter positive numbers only)	\$1,024,678
	Carrier Operating Property Leased to Others	
	Less: Reserve for Depreciation (enter positive numbers only)	
	Non-Carrier Operating Property	
	Less: Reserve for Depreciation (enter positive numbers only)	
	TOTAL TANGIBLE PROPERTY	<u>\$122,269</u>
	INTANGIBLE PROPERTY	
	Organization, Franchises & Permits	
	Less: Reserve for Amortization (enter positive numbers only)	
	Other Intangible Property	\$5,000
	Less: Reserve for Amortization (enter positive numbers only)	
	TOTAL INTANGIBLE PROPERTY	<u>\$5,000</u>
	Other Accounts	
	Investment Securities and Advances	
PRINTED IN COLUMN AND ADDRESS OF THE PARTY O	Special Funds	
	Deferred Debits	\$15,811
	Total Other	\$15,811
*LIPOLANGE	TOTAL ASSETS	\$615,395

Į.		
SC#	3627	**************************************
ear		
	BALANCE SHEET	
	(LIABILITIES)	
-	CURRENT LIABILITIES	
	Notes Payable & Matured Long Term Obligations	
	Accounts Payable	
	Wages Payable	
	C.O.D.'s Unremitted	
	Taxes Accrued	
	Interest Accrued	
	Matured Interest	
	Other Current Liabilities	
	TOTAL CURRENT LIABILITIES	
	LONG TERM DEBT DUE WITHIN ONE YEAR	
	Equipment Obligations and other Debt	
	LONG TERM DEBT DUE AFTER ONE YEAR	
	Advances Payable	W
	Equipment Obligations	\$62,97
TO THE STATE OF TH	Less reacquired and nominally issued (enter positive number only)	\$02,970
	Other Long Term Obligations	
	Less reacquired and nominally issued (enter positive number only)	
	TOTAL LONG TERM DEBT	\$62,97
	A OTTAB DOTTO TERMI DEDI	402,37
	Other	
	Total Deferred Credits	
	Total Reserves	
	TOTAL OTHER	
	SHAREHOLDERS' (OR PROPRIETORS') EQUITY	
	Capital Stock	\$31,280
	Proprietors' Capital	
	Retained Earnings	\$521,137
	TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY	\$552,417
	TOTAL LIABILITIES & SHAREHOLDERS'	
	(OR PROPRIETORS') EQUITY	\$615,395
	TOTAL ACCORDA	
	TOTAL ASSETS	\$615,395
L	OO TOTAL ASSETS EQUAL TOTAL LIABILITIES & SHAREHOLDERS' (OR	PROPRIETORS)

Name DISPOSALS INC dba DILLON DISPOSAL SERVICE			
PSC#	3627		T
YEAR	3021		
1 *******	:		
L	MONTHLY CUST	OMER LISTING FOR CLAS	S D SERVICE
Cus	stomer listing must include at lea	ast 20 customers per month during e	each month of the calendar year.
	JANUARY	FEBRUARY	MARCH
1			
2			
3			
4 5			
5			
6 7			
8			
9			
10			
11			
12	***************************************		
13			
14			
15			
16			
17			
18 19			
20			
	APRIL	MAY	JUNE
[ONL
2			
3			
5			
5			
<u>_</u>			
0			
1			
2			
3			
4			
5			
6			
7			
8			
9			

Name	DISPOSALS INC dba DILLON D	ISPOSAL SERVICE	
PSC#	3627		
Year	3027		
	MONTHLY CUSTO	DMER LISTING FOR CLAS	S D SERVICE
THE PARTY OF THE P		The second secon	100 miles (100 miles (
Cı	ustomer listing must include at leas	st 20 customers per month during	each month of the calendar year.
18/17/00/70 ² (18/19/19/19/19/19/19/19/19/19/19/19/19/19/	## V		
1	JULY	AUGUST	SEPTEMBER
2			
3			
4			
5			
6			
7			
9			
10			
11			
12			
13			
14			
15 16			
17			
18			
19			
20			
	0070050		
***************************************	OCTOBER	NOVEMBER	DECEMBER
)			
V == 10 - VE-1010			
0			
1			
2			
3			
4 5			
6			
7			
8			
9			
0			

Name	DISPOSALS INC dba DILLON DISPOSAL SERVICE
PSC#	3627
YEAR	

VERIFIED STATEMENT

Schedule 5 must be completed by Class D carriers who did not generate \$5,000 gross revenue from Class D operations and did not serve twenty (20) customers for each month of the calendar year.

The verified statement will be reviewed by the Commission and a determination made whether the certificate should be cancelled.

STATEMENT:				

Name	DISPOSALS INC dba DILLON DISPOSAL SERVICE
PSC#	3627
YEAR	

OATH

STATE OF	MONTA	NA
		SS.
County of	BEAVERH	EAD
foregoing retrecords of sai complete and and every ma and I further set forth exce in the foregoi	urn has been prepared id motor carrier; the correct statement atter and thing there say that no deduction those shown in	e of the motor carrier, above named, on my oath say that the ared, under my direction, from the original books, papers and at I have carefully examined the same and declare the same to be a of the business and affairs of said motor carrier in respect to each ein set forth, to the best of my knowledge, information and belief; ons were made before stating the gross earnings or receipts herein the foregoing accounts; and that the accounts and figures contained all of the financial operations of said motor carrier during the filed. (Signature of owner/officer/authorized representative)
		PRESIDENT
		(Title)
SUBSCRIE	BED AND SWOR	N to before me this day of March 20 19
SEAL)	MISTY WILSON NOTARY RUBLIC for the State of Montana Residing at Dillon, MT My Commission Expires July 12, 2022	Notary Public In and for the State of Montana
		Residing at
		My Commission Expires