Montana Public Service Commission Motor Carrier Annual Report

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	Glo	cer	Park	, Inc	•						
AUTHORITY)											
PSC Number	20	08				So	ee Gener	al Insti	ruction # 5		
See Gen	eral in:	struction	#1								
Reporting Year	20										
Reporting Peri	iod (if o dar year			1	mm/yyyy	to mm/yyy to	y format	,			
CARRIER ADDRESS	Po	Box)4	<u> </u>							
	City	Eust	Gla	ucr	State	MT		Zip	5943	, L-)	
	Check Is the address shown above the carriers official address now on file at the PSC YES (address at which you now receive monthly notice and other materials from the PSC)?										
YES NO		If the	answer	to the al		stion is NO I to that sh			your offi	cial add	ress
Carrier e-mail address							optional				
		F	Person Co	mpleting	Report						
Name	Go	vy F					_				
Phone Number	Phone Number 406 - 892 - 6716										
E-mail Address	E-mail Address										
Check One											
YES						PORT AN					
NO						LD GOOD	S UR GA	KRY(ac nakiv	IG	
If NO See Gen	If NO See General THE FILING PERIOD?										
1	······································	14 144 445 47 1111			blic Serv	rice Comr	nission				

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

GENERAL INSTRUCTIONS

Enclosed is the motor carrier annual report form prescribed by the Montana Public Service Commission. This report must be filed with the Montana Public Service Commission on or before MARCH 31st of each year following that which the report is made. Filing of an annual report by motor carriers is prescribed by Section 69-12-401, MCA. Failure to submit this report in full may jeopardize your operating authority.

- 1. Report should represent operations for the calendar year (January 1st to December 31st). If your company wishes to file on a fiscal year, a written request must be submitted to the Commission for approval. All subsequent reports must then be filed on the fiscal year end.
- 2. All data may be reported to the nearest whole dollar or whole number.
- 3. If there were no regulated intrastate moves during the filing period, a negative report may be filed. To file a negative report, complete the cover sheet and note that no regulated intrastate passengers or commodities were transported. No further financial information is required. Mail the completed cover sheet and signed and notarized oath page to the public service commission.
- 4. All annual report filings must be signed an by owner or officer of the company and notarized by a notary public.
- 5. If a company operates under more than one PSC number, <u>registered in exactly the same</u> <u>company name</u>, a combined report may be filed. However that fact should be clearly noted on the cover of the report.

6. ALL CARRIERS MUST COMPLETE:

Schedule 1 (Income Statement)

Schedule 2 (Balance Sheet)

Schedule 3 (Intrastate Revenue)

Oath

7. Class D carriers <u>not generating</u> \$5,000 gross revenue from the Class D authority during the calendar year must complete:

Schedule 4 (Monthly Customer Listing)

8 Class D carriers NOT MEETING reporting requirements listed in the above schedules must complete:

Schedule 5 (Verified Statement)

PSC # Year	2021		
		SCHEDULE 1	
·		DICOLOR CELEBRATION	
		INCOME STATEMENT	
	Operating 1	Revenue	
1.	Intra	astate Revenue	99,000
2.	Inte	rstate Revenue	1,000
3.	Non	-Regulated Revenue	
4.	TOTAL RE	VENUE	99,000
			1,000
	Expenses		
5.	Sala	ries—Officers & Supervisory Personnel	September 1 and September 2 an
	Sala	ries & Wages	
6.		Clerical & Administrative	
7.		Drivers & Helpers	
8.		Cargo Handlers	
9,		Vehicle Repair & Service	9753
10.		Other Labor	
	Othe	er Fringes	
11.		Payroll Taxes	20,600
12.		Workman's Compensation	
3.		Pension & Welfare Expenses	
	Oper	rating Supplies & Expenses	
14,		Fuel for Motor Vehicles	12, 229
5.		Vehicle Parts	84,685
6.	:	Other Operating Supplies & Expenses	
7.		General Supplies & Expenses	
0	Oper	ating Taxes & Licenses	
8. 9.		Gas, Fuel and Oil Taxes	
10.		Real Estate & Personal Property Taxes	
1.		Vehicle License & Registration Fees	16,242
2.	Tengana	Other Taxes	
3.	Insur	munications & Utilities	30,000
1			8662
.4. .5.	Debi	Revenue Equipment	
6.		Other	
	Durch	nased Transportation	
7.	1 uloi	With Driver	
8.	····	Without Driver	
9.		Other Purchased Transportation	
		1 TANDO LAMBOATHON	
0.		ing & Office Equipment Rents	
1.		or Loss on Disposition of Operating Assets	
2.	Misce	ellaneous Expenses	399
3.	TOTAL EXP	PENSES	
			750 -
4.	NET INCOM	IE OR LOSS	(160,748)

Year	268	
	2021	
	SCHEDULE 2	
	BALANCE SHEET	
	(ASSETS)	
	(ASSETS)	
······································	CURRENT ASSETS	
1.	Cash & Working Funds	
2.	Special Deposits	
3.	Temporary Cash Investments	
4.	Notes Receivable	
5.	Accounts Receivable	
6.	Prepayments	
7.	Materials & Supplies	
8.	Other Current Assets	
9.	TOTAL CURRENT ASS	ETS
	TANGIBLE PROPERTY	
10.	Carrier Operating Property	HOU. 770
11.	Less: Reserve for Depreciation	183,403
12.	Carrier Operating Property Leased to Others	1001103
13.	Less: Reserve for Depreciation	
14.	Non-Carrier Operating Property	
15.	Less: Reserve for Depreciation	
16.	TOTAL TANGIBLE PROPEI	RTY 221, 367
	NTANGIBLE PROPERTY	
17.	Organization, Franchises & Permits	24.40(1-24.50)
18.	Less: Reserve for Amortization	
19.	Other Intangible Property	
20.	Less: Reserve for Amortization	
21.	TOTAL INTANGIBLE PROPER	RTY
22.	Total Investment Securities and Advances	
23.	Total Special Funds	
24.	Total Deferred Debits	
25.]	TOTAL ASSETS	221,367

PSC#	26	8		
Year	20%			
			SCHEDULE 2	
			BALANCE SHEET	
		· · · · · · · · · · · · · · · · · · ·	(LIABILITIES)	
		<u> </u>		
	CURI		ABILITIES	
26		Notes Pay	yable & Matured Long Term Obligations	
27		Accounts		
28		Wages Pa		
29 30			Unremitted	
30 31		Taxes Ac		
32		Interest A Matured I		
33			rrent Liabilities	
34	-	Other Cur		
J 1	-		TOTAL CURRENT LIABILITIES	8
	LONG	TEDMI	DEBT DUE WITHIN ONE YEAR	
35	LON		at Obligations and other Debt	
	 	Dquipmen	l Congacions and other Deot	
	LONG	TERMI	DEBT DUE AFTER ONE YEAR	
36	1201	Advances		
37			t Obligations	
38	 	Exquipition	Less reacquired and nominally issued	
39	1	Other Lon	g Term Obligations	
40	 		Less reacquired and nominally issued	
41	-		TOTAL LONG TERM DEBT	
			TOTAL BOTTO TRANSPERS	
42		Total Defe	erred Credits	
43		Total Rese		
				-
	SHAR		RS' (OR PROPRIETORS') EQUITY	
14.	.,	Total Capi		A STATE OF THE PARTY OF THE PAR
15			rietors' Capital	
16	ļ <u></u>	Total Reta	ined Earnings	
17			TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY	
10	TICO DEL A	TTABE	TANKS A CITY IN THE COLUMN TO	
18	JUIA	<u>L'LIABIL</u>	ITIES & SHAREHOLDERS' (OR PROPRIETORS') EQUITY	221,367
	DO TO	OTAL ASS	SETS EQUAL TOTAL LIABILITIES & SHAREHOLDERS' (OR	
		PROPRIE	TORS) EQUITY? IF NOT PLEASE REVIEW AND MAKE	
			CORRECTIONS	
			7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	

PSC #	208
Year	2021
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	SCHEDULE 3
	INTRASTATE OPERATING REVENUE
Complete the followi	ng Schedule reflecting intrastate operating revenue.
	INTRASTATE REVENUE
Household Goods	
Passengers	
Class C	
Class D (Garbage)	
Class D carriers NO	T HAVING \$5,000 gross revenue from Class D transportation go to Schedule 4
Class D carriers not	conorating \$5 000 aross revenue From Class D transportation or consistent
twenty (20) customore	generating \$5,000 gross revenue From Class D transportation or serving seach month, go to Schedule 5.
	each month, go to schedule 3.
TOTAL	
INTRASTATE	
REVENUE	
	Note: Total Intrastate Revenue must equal the intrastate revenue amount
	shown on Line 1, Schedule 1, Income Statement.

PSC#	
Year	

SCHEDULE 4

MONTHLY CUSTOMER LISTING FOR CLASS D SERVICE

	January	least 20 customers per month during eac February	March
1			
2			
3			
4			
5			
6	· · · · · · · · · · · · · · · · · · ·		
7			
8			
9			
10			
11			
12		, , , , , , , , , , , , , , , , , , ,	
13			
14			
15			
16			
17			
18			
19			
20		<u></u>	
	April	May	June
1	April	May	June
2	April	May	June
2 3	April	May	June
2 3 4	April	May	June
2 3 4 5	April	May	June
2 3 4 5 6	April	May	June
2 3 4 5 6 7	April	May	June
2 3 4 5 6 7 8	April	May	June
2 3 4 5 6 7 8 9	April	May	June
2 3 4 5 6 7 8 9	April	May	June
2 3 4 5 6 7 8 9	April	May	June
2 3 4 5 6 7 8 9 10	April	May	June
2 3 4 5 6 7 8 9 10 11 12 3	April	May	June
2 3 4 5 6 7 8 9 10 11 12 3 4	April	May	June
2 3 4 5 6 7 8 8 9 10 11 12 2 3 4 5	April	May	June
2 3 4 5 6 7 8 9 9 10 11 12 12 13 4 4 5 6	April	May	June
2 3 4 5 6 7 8 9 10 11 12 3 4 4 5 6 7	April	May	June
2 3 4 5 6 7 8 9 10 11 12 12 13 4 4 5 6	April	May	June
2 3 4 5 6 7 8 9 10 11 12 3 4	April	May	June
2 3 4 5 6 7 8 9 10 11 12 3 4 4 5 6 7	April	May	June

PSC#	
Year	

SCHEDULE 4 cont.

	July	August	September
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
13.			
14		[
15			
16			
17			
18			
19			
	100		4
20		November	December
20	October	November	December
20		November	December
20 1 2		November	December
20 1 2 3		November	December
20 1 2 3 4		November	December
20 1 2 3 4 5		November	December
20 1 2 3 4 5 6		November	December
20 1 2 3 4 5 6 7		November	December
1 2 3 4 5 6 7 8		November	December
20 1 2 3 4 5 6 7 8 9		November	December
20 1 2 3 4 5 6 7 8 9 10		November	December
20 1 2 3 4 5 6 7 8 9 10 11		November	December
20 1 2 3 4 5 6 7 8 9 10 11 12		November	December
20 1 2 3 4 5 6 7 8 9 10 11 12 13		November	December
20 1 2 3 4 5 6 7 8 9 10 11 12 13 14		November	December
20 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15		November	December
20 1 2 3 4 5 6 7 8 9 10 11 12 13 14		November	December

20	ļ	
		l l

PSC#	
Year	

SCHEDULE 5 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:

PSC # <u>268</u> Year <u>2021</u>			
	OATH		
STATE OF Montana			
	SS.		
County of Flathead			
that the foregoing return has been prepared, under my comotor carrier; that I have carefully examined the same a of the business and affairs of said motor carrier in respect to f my knowledge, information and belief; and I fur gross earnings or receipts herein set forth except those same as a comparison of the same and the same as a comparison of the same as a com	of the motor carrier, above named, on my oath say direction, from the original books, papers and record of said and declare the same to be a complete and correct statement ext to each and every matter and thing therein set forth, to the other say that no deductions were made before stating the shown in the foregoing accounts; and that the accounts and of the financial operations of said motor carrier during the		
SUBSCRIBED AND SWORN to before me this 13th day of April , 2022.			
(SEAL)	Kayla Hatty Notary Public		
KAYLA HARTLEY NOTARY PUBLIC for the State of Montana Residing at Whitefish, Montana My Commission Expires	In and for the State of Montana Residing at White fish, MT		
February 24, 2026	My Commission Expires 2/24/2026		