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MONT. P.S. COMMISSION

Montana Public Service Commission

Motor Carrier Annual Report

Carrier Name  
(EXACTLY AS  
SHOWN ON  
PSC  
AUTHORITY)

LEWISTOWN DISPOSAL, INC.

PSC Number

7913/2 D See General Instruction # 5

See General Instruction # 1

Reporting Year

2015

Reporting Period (if other than  
calendar year)

mm/yyyy to mm/yyyy format

/ to /

CARRIER  
OFFICIAL  
ADDRESS  
(SHOW AS ON  
FILE IN  
COMMISSION  
RECORDS)

PO BOX 1143, LEWISTOWN, MT 59457

Carrier e-mail  
address

VickieF@MontanaWasteSystems.com

Person Completing Report

Name

VICKIE FORBES

Phone Number

406-761-3863

E-mail Address

VickieF@MontanaWasteSystems.com

Check One

YES

NO

WERE REGULATED INTRASTATE MOVEMENTS  
CONDUCTED DURING THE FILING PERIOD?

If NO See General  
instruction #3

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

<b>Name</b>	LEWISTOWN DISPOSAL, INC.	
<b>PSC #</b>	7913/2 D	
<b>Year</b>	2015	
<b>BALANCE SHEET (ASSETS)</b>		
<b><u>CURRENT ASSETS</u></b>		
Cash & Working Funds		\$95,815
Special Deposits		
Temporary Cash Investments		
Notes Receivable		
Accounts Receivable		\$56,035
Prepayments		\$9,905
Materials & Supplies		\$2,159
Other Current Assets		\$1,235,415
<b>TOTAL CURRENT ASSETS</b>		<b><u>\$1,399,329</u></b>
<b><u>TANGIBLE PROPERTY</u></b>		
Carrier Operating Property		\$879,786
Less: Reserve for Depreciation (enter positive numbers only)		\$699,775
Carrier Operating Property Leased to Others		
Less: Reserve for Depreciation (enter positive numbers only)		
Non-Carrier Operating Property		\$976,885
Less: Reserve for Depreciation (enter positive numbers only)		\$762,725
<b>TOTAL TANGIBLE PROPERTY</b>		<b><u>\$394,171</u></b>
<b><u>INTANGIBLE PROPERTY</u></b>		
Organization, Franchises & Permits		\$1,036,912
Less: Reserve for Amortization (enter positive numbers only)		\$1,036,912
Other Intangible Property		
Less: Reserve for Amortization (enter positive numbers only)		
<b>TOTAL INTANGIBLE PROPERTY</b>		
<b>Other Accounts</b>		
Investment Securities and Advances		
Special Funds		
Deferred Debits		
<b>Total Other</b>		
<b>TOTAL ASSETS</b>		<b>\$1,793,500</b>

Name	LEWISTOWN DISPOSAL, INC.	
PSC #	7913/2 D	
Year	2015	
<b>BALANCE SHEET (LIABILITIES)</b>		
<b><u>CURRENT LIABILITIES</u></b>		
Notes Payable & Matured Long Term Obligations		
Accounts Payable		\$37,352
Wages Payable		\$30,422
C.O.D.'s Unremitted		
Taxes Accrued		\$1,236
Interest Accrued		
Matured Interest		
Other Current Liabilities		\$41,238
<b>TOTAL CURRENT LIABILITIES</b>		<b>\$110,248</b>
<b><u>LONG TERM DEBT DUE WITHIN ONE YEAR</u></b>		
Equipment Obligations and other Debt		\$26,965
<b><u>LONG TERM DEBT DUE AFTER ONE YEAR</u></b>		
Advances Payable		
Equipment Obligations		\$32,489
Less reacquired and nominally issued (enter positive number only)		
Other Long Term Obligations		
Less reacquired and nominally issued (enter positive number only)		
<b>TOTAL LONG TERM DEBT</b>		<b>\$59,454</b>
<b><u>Other</u></b>		
Total Deferred Credits		
Total Reserves		
<b>TOTAL OTHER</b>		
<b><u>SHAREHOLDERS' (OR PROPRIETORS') EQUITY</u></b>		
Capital Stock		\$1,225,000
Proprietors' Capital		
Retained Earnings		\$398,798
<b>TOTAL SHAREHOLDERS' (OR PROPRIETORS') EQUITY</b>		<b>\$1,623,798</b>
<b>TOTAL LIABILITIES &amp; SHAREHOLDERS' (OR PROPRIETORS') EQUITY</b>		<b>\$1,793,500</b>
<b>TOTAL ASSETS</b>		<b>\$1,793,500</b>
DO TOTAL ASSETS <b>EQUAL</b> TOTAL LIABILITIES & SHAREHOLDERS' (OR PROPRIETORS) EQUITY? IF NOT PLEASE REVIEW AND MAKE CORRECTIONS.		

Name	LEWISTOWN DISPOSAL, INC.	
PSC #	7913/2 D	
Year	2015	
<b>INTRASTATE REVENUES</b>		
	Household Goods	
	Passengers	
	Class C	
	Class D (Garbage)	\$1,147,530
	<b>TOTAL INTRASTATE REVENUE</b>	<b>\$1,147,530</b>
<b>INCOME STATEMENT</b>		
<b>Operating Revenue</b>		
	Intrastate Revenue	\$1,147,530
	Interstate Revenue	
	Non-Regulated Revenue	\$751,617
	<b>TOTAL REVENUE</b>	<b>\$1,899,147</b>
<b>Operating Expenses</b>		
<b>Salaries &amp; Wages</b>		
	Salaries—Officers & Supervisory Personnel	\$71,199
	Clerical & Administrative	\$26,173
	Drivers & Helpers	\$193,100
	Cargo Handlers	
	Vehicle Repair & Service	\$49,566
	Other Labor	\$38,847
<b>Fringes</b>		
	Payroll Taxes	\$23,563
	Workman's Compensation	\$18,251
	Pension & Welfare Expenses	\$85,537
<b>Operating Supplies &amp; Expenses</b>		
	Fuel for Motor Vehicles	\$99,623
	Vehicle Parts	\$73,062
	Other Operating Supplies & Expenses	\$628,700
<b>Operating Taxes &amp; Licenses</b>		
	Gas, Fuel and Oil Taxes	
	Real Estate & Personal Property Taxes	\$6,025
	Vehicle License & Registration Fees	\$5,917
	Other Taxes	\$2,875
<b>Depreciation &amp; Amortization</b>		
	Revenue Equipment	\$37,459
	Other	\$22,734
<b>Purchased Transportation</b>		
	With Driver	
	Without Driver	
	Other Purchased Transportation	
<b>Office/General</b>		
	Insurance	\$24,364
	Communications & Utilities	\$14,389
	Building & Office Equipment Rents	\$5,979
	General Supplies & Expenses	\$48,944
	Miscellaneous Expenses	
	Gain on Disposition of Operating Assets	
	Loss on Disposition of Operating Asset (enter as positive number)	
	<b>TOTAL EXPENSES</b>	<b>\$1,476,307</b>
	<b>NET INCOME OR (LOSS)</b>	<b>\$422,840</b>

Name	LEWISTOWN DISPOSAL, INC.
PSC#	7913/2 D
YEAR	2015


# OATH

STATE OF Montana

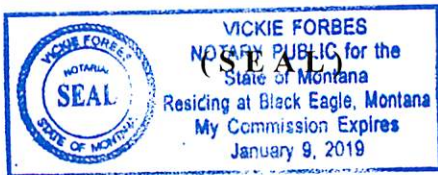
SS.

County of Cascade

I, the undersigned representative of the motor carrier, above named, on my oath say that the foregoing return has been prepared, under my direction, from the original books, papers and records of said motor carrier; that I have carefully examined the same and declare the same to be a complete and correct statement of the business and affairs of said motor carrier in respect to each and every matter and thing therein set forth, to the best of my knowledge, information and belief; and I further say that no deductions were made before stating the gross earnings or receipts herein set forth except those shown in the foregoing accounts; and that the accounts and figures contained in the foregoing return embrace all of the financial operations of said motor carrier during the period for which said return is filed.

  
 \_\_\_\_\_  
 (Signature of owner/officer/authorized representative)  
 \_\_\_\_\_  
 President  
 \_\_\_\_\_  
 (Title)

SUBSCRIBED AND SWORN to before me this  
29<sup>th</sup> day of March 20 16



Vickie Forbes  
 \_\_\_\_\_  
 Notary Public  
 In and for the State of Montana  
 \_\_\_\_\_  
 Residing at Black Eagle, MT  
 \_\_\_\_\_  
 My Commission Expires Jan 9, 2019  
 \_\_\_\_\_