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HAI 2014 ASSESSME This Report MUST BE FILED not later than MA violati TRADE OR CORPORATE NAME OF UTILITY: DOMITROVITSCH HOLDING'CO., ELC CONTACT NAME: ADDRESS 1: 1648 WASHINGTON AVENUE CITY, STATE, ZIP: CONTACT STATE, ZIP: CON	LIC UTILITY CO PO BOX 326 RRISBURG, PA 1 NT REPORT ARCH 31, 2015. Fai on continues (66 Pa.	MMISSION 5 7105-3265 -MOTOR C lure to file may rest C.S. § 3301). DTILITY C 707 707	2015 ARRIER alt in fines u	PA PA		
NORTHAMPTON , PA 18067						
OPERATING REVENUE FOR CALENDAR YEAR 2014 (January 1, 2014-December 31, 2014) (All amounts shall be rounded to the nearest dollar.) PROPERTY HOUSEHOLD GOODS Group and Party 16 or more more more passenger 15 and Under						
I. PA INTRASTATE OPERATING REVENUE	\$426,927.99	\$	\$		\$	
2. PA EXEMPT INTRASTATE REVENUE	\$ 0.00		\$		\$	
3. PA NET INTRASTATE OPERATING REVENUE (Subtract Line 2 from Line 1)	\$426,927.99	\$	\$		\$	
· · · · · · · · · · · · · · · · · · ·	(4 11 -	mounte shall be new	nded to the	nan rost r	tollow)	
	(All a	mounts shall be rou	nded to the nearest dollar.)			
PA EXEMPT INTRASTATE REVENUE Enter a number from enclosed Exempt Revenue list as applicable. (Attach additional sheets as needed)	PROPERTY	HOUSEHOLD GOODS	Group and Pai more		Other	
	\$	\$	\$		\$	
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		1 5 . J. J. J. 1				
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TOTAL (Engr on La 2 above)	\$ (), 20	\$	\$		\$	
TOTAL (Engr on Line 2 above) \$						
2014 UCR Registered: YES NO * NO LONGER IN BUSINESS - CLOSED 4/15/14						
IF YES:						
US DOT #: INTERSTATE OPERATING REVENUE: \$						
MC Number:						

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AUTI	IORIZATION FOR RELEASE O	OF STATE TAX RECORDS			
accuracy of financial Pennsylvania Depart	information supplied to the Public Util	blic Utility Code, as a means to verify the ity Commission, I hereby authorize the c Utility Commission, any tax records filed or dual.			
	DONSTROVETSCH	tuldens co ZLC			
	Utility Name				
	x				
		gnature			
Date: 3/2/15	BRAD DOMETRONF	TSCH PRESEDANT			
Date. <u>5/2/15</u>	Name (Printed)				
<u>_</u>	AFFIDAVI	r			
I affirm that the information	reported herein is complete,-	true and correct.			
	(Signature of Individual or Officer)	<u>3/z//5</u>			
	· · · · · · · · · · · · · · · · · · ·	NOTADIZATION			
READABLE (PRINT OR TYPE) NAME OF INDIVIDUAL or OFFICER ABOVE:		NOTARIZATION (Required) Subscribed and sworn to before me			
BRAD DOMSTRUSTSCH		Parterion Cty			
		this a day of 2015			
DOMSTRUSSIA HOLDSIL CO LL C		NOTARY SIGNATURE			
		OFFICIAL MOTOR Provis			
FEDERAL ID:	TELEPHONE NO .:	SEAL CUTTITION VIE OFFICIAL SEAL			
20 351 4559	Office (), Ext.	Debblo Raschke, Notary Public South Whitehall Twp., Lehigh County			
	Cell (LIV) 217 3275	My Commission Expires Jan. 19, 2016 MEMBER, PENNSYLVAUIA ASSOCIATION OF NOTARIES			
Name of person to be contacted for add	tional information:	(Date My Commission Expires)			
Name: SAME AD ADOVE (printed)		Jan 19, 2010.			
Telephone:	Ext.				
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