

Washington Unified Business Identifier (UBI) No.:

(If you do not know your UBI No. please contact the Department of Licensing at 360-664-1400)

ANNUAL REPORT CERTIFICATION

I certify that I, Controller Mark Dowdy, the responsible account officer for _____ have examined the foregoing report; that, to the best of my knowledge, information and belief, all statements of fact contained in said report are true and said report is a correct statement of the business and affairs of the above-named respondent in respect to each and every matter set forth therein during the period from January 1, 2009, to December 31, 2009, inclusive.

Name (Printed) Mark Dowdy Title Controller
Signature: [Handwritten Signature] Date 4-29-10

Online Annual Report Certification

I acknowledge that the foregoing Annual Report has been submitted electronically; that, to the best of my knowledge, information and belief, all statements of fact contained in all attached schedules are true and said report is a correct statement of the business and affairs of the above-named respondent in respect to each and every matter set forth therein during the period from January 1, 2009, to December 31, 2009, inclusive. I agree that my name typed in lieu of my handwritten signature shall be sufficient to deem the report complete.

Authorized By:
Please Type Full Name Here
Authorized Date:
Please Type Full Date Here

SCHEDULE 1

TYPE OF MOTOR CARRIER Individual Partnership Corporation, Other (LP, LLP, LLC, etc.)

List the name, title, and percentage of partner's share or stock distribution for major stockholders. If LLC, list members and percentage of ownership.

Name: Steve Margenthaler Title: President Percent/Shares/Stock/Ownership: 100%
 Name: _____ Title: _____ Percent/Shares/Stock/Ownership: _____
 Name: _____ Title: _____ Percent/Shares/Stock/Ownership: _____

Safety Director Name: Art Villa Telephone Number: (406) 441-0205

Claims Manager Name: ~~Art Villa~~ Mike Placyn Telephone Number: (406) 441-0112

Drivers employed during the year: 5 Portland Terminal

Total Vehicles operated during the year:	Total Vehicles Owned:	Total Vehicles Leased:	Total Vehicles Under 10,000 lbs. (gvw rating):
<u>12</u>	<u>12</u>	<u>0</u>	<u>0</u>

Number of recordable intrastate and interstate accidents in 2009.

(Please include the total recordable accidents for both intrastate and interstate operations based in Washington.)

Recordable Accidents	Intrastate	Interstate
An occurrence involving a commercial vehicle on a public road in interstate or intrastate commerce that resulted in:		
A. A fatality.	<u>0</u>	<u>0</u>
B. An injury to a person requiring immediate treatment away from the scene of the accident.	<u>0</u>	<u>0</u>
C. Disabling damage to a vehicle, requiring it to be towed from the accident scene.	<u>0</u>	<u>0</u>
Total number of recordable accidents	<u>0</u>	<u>0</u>

Total operating miles for the year 2009:

Intrastate 0 Interstate Portland Terminal
Intrastate: Trips that operate exclusively within the state of Washington.
Interstate: Trips that operate outside the state of Washington.

TERMINAL FACILITIES

Do you operate terminals at locations other than the primary address of record? Yes No
 If yes, list (or attach a list) the address of each terminal located in Washington State:

STORAGE FACILITIES

Do you operate your own storage facilities? Yes No

If yes, list (or attach a list) the address of each warehouse located in Washington State:

MILEAGE

Total *intrastate* operating miles in 2009:

INTERSTATE OPERATIONS

Do you have interstate operating authority? Yes No

If yes, what is your MC#: 67234

Do you operate as the agent of an interstate carrier? Yes No

If yes, what is the name of the carrier? United Van Lines

HOUSEHOLD GOODS MOVES

Total number of household goods moves completed during the year: 350 Portland Terminal

Number of household goods moves completed in Washington (intrastate): 0

Total number of written estimates issued during the year: 139

Number of written estimates in Washington (intrastate): 0

Total number of Loss and/or Damage Claims received during the year: 0 Portland Terminal

Number of Loss and/or Damage Claims for Washington (intrastate): 0

CARGO INSURANCE

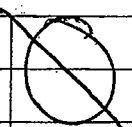
Cargo Insurance Company Name: Vanliner Insurance Co.

Cargo Insurance Policy Number: CGT3003600

SMALL BUSINESS No Yes **Small Business means** any business entity, including a sole proprietorship, corporation, partnership, or other legal entity, owned and operated independently from all other businesses, that has the purpose of making a profit, and has **fifty or fewer employees**.

SCHEDULE 2

You are not required to complete **Schedule 2** if you are reporting "0" revenue or if you are a "small business" as defined on page 4.

Line No.	Item	Total Amount
OPERATING REVENUES		
1	Common Carrier (\$ Washington Intrastate Household Goods Revenue)	
2	Contract Carrier (\$ Washington Intrastate Household Goods Revenue)	
3	Other Operating Revenues (describe)	
4	Total Operating Revenues	(Total of Lines 1 - 3)
OPERATING EXPENSES		
5	Total Salaries and Wages	
6	Total Payroll Taxes and Related Expenses	
7	Total Payroll Fringes	
8	Fuel, Including Fuel Tax	
9	Oil and Lubricants; Repairs; Vehicle Parts and Outside Maintenance; Tires and Tubes; Other Operating Supplies and Expenses	
10	Total General Supplies & Expenses	
11	Total Operating Taxes & Licenses	
12	Total Insurance and Safety	
13	Total Communications & Utilities	
14	Total Depreciation & Amortization	
15	Total Operating Rents	
16	GAIN OR LOSS ON DISPOSITION OF OPERATING ASSETS	
17	Legal Services	
18	Accounting Services	
19	Uncollectible Revenue; Other Miscellaneous Expenses & Professional Fees	
20	TOTAL OPERATING EXPENSES GRAND TOTAL (Total of Lines 5 - 19)	
21	NET CARRIER OPERATING INCOME (Line 4 minus Line 20)	
22	Other Income (Credit) (describe)	
23	Interest Expense	
24	Corporate Income Tax	
25	Other Deductions (describe)	
26	Income Deductions (Total of Lines 22, 23, & 24 minus Line 25)	
27	NET INCOME (Line 21 minus Line 26) (Show loss in brackets)	

REGULATORY FEE CALCULATION SCHEDULE

Due May 1, 2010

Company Name Mergenthaler Transfer & Storage Co. Annual Report Year 2009

In accordance with RCW 81.24.010 and 81.80.321 "Regulatory Fees", the Commission requires Household Goods companies to file reports of gross intrastate operating revenue and pay fees on that revenue. Every company subject to regulation shall file with the Commission a statement under oath showing its gross intrastate operating revenue from operations for the preceding year and pay to the Commission a fee as instructed below. There is no minimum fee.

All Washington intrastate carriers of Household Goods must complete and file this report. If you did not have revenue from the intrastate transportation of Household Goods indicate "0" on Line 1

1	Total Gross Intrastate Operating Revenue **			1	\$	0
2	Total Regulatory Fees owed (enter amount from Line 1)	\$	x .25% (.0025) =	\$		
<small>Agency Use Only 001-111-02-61-20-01</small>						
Complete Lines 3 through 6 if filing after May 1						
3	Penalties on Regulatory Fees filed after May 1			3		
3a	Total Penalties on Regulatory Fees owed - enter amount from Line 2	\$	x 2% (.02) =	\$		
4	Interest on Regulatory Fees filed after May 1			4		
4a	Amount from Line 2 _____ x Number of months past May _____ x 1% (.01) =			4a	\$	
5	Total Penalties and Interest owed (Line 3a plus Line 4a)			5	\$	
<small>Agency Use Only 001-111-02-61-20-01</small>						
6	Total Regulatory, Penalty and Interest Fees Due (Line 2 plus Line 5)			6	\$	0

** Note: Gross Washington intrastate operating revenue is defined as all revenue collected for the year from rates under Washington Utilities and Transportation Commission Tariff 15C. The revenues subject to the Commission's regulatory fees are gross Washington intrastate operating revenues before deductions for uncollectibles, unbillables or the payment of state and federal taxes, i.e. "Gross Revenues" means before any deductions from Revenue Receipts.

** Portland Terminal SOLD 1-20-10 #*