•	Service Date	ADMINISTRATIVE CITATION Illinois Commission 527 East Capitol Avenue Springfield, IL 62791	100 # 188035
CARRIER R		LLC	FMCSA#: C
	PHYSICAL ADDRESS 1816	MICHIGAN AVE	APT 212
L S S O R	LEGAL NAME	R VILLE STATE	ZIP (10568
	TRADE NAME		
	PHYSICAL ADDRESS		
	CITY	STATE	ZIP
DRIVER VEHI	LAST NAME	FIRST NAME	MI
	ADDRESS		
	CITY	STATE	ZIP
	DL/CDL	STATE CLA	ASS DOB
	PLATE NUMBER	STATE	EXPIRATION DATE
	MAKE	MODEL	YEAR
LE	1 2 3 4 Tow Passenger Recreational T Car Veh or Truck Tr	ruck Trailer or Commercial Other	
OFFENSE	LOCATION C CAP, TO	L AVE SPRINGER	OZ.18.15
	OFFENSE: 625 ILCS 5/	181-41041	(K)
	☐ Operating without ICC authority - 1st ☐ Operating while revoked - 1st Offens ☐ Operating while suspended - 1st Offe	e - \$500 / 2nd Offense - \$600	ease on file - \$300 roper vehicle identification - \$100 er - \$100
	☐ Fallure to provide annual intrastate registration card - \$300 ☐ Operating without Unified Carrier Registration - \$300		
	REMARKS:		
	VIOLATION OF		5176
STONATURES	OFFICER / INVESTIGATOR CERTIFICATION Under penalties as provided by law, the undersigned Officer/Investigator certifies that the statements set forth in this administrative Citation are true and correct.		
	OFFICER / INVESTIGATOR SIGNA	02 20 15 2 15 P. TURE DATE TIME	O16 -79
	DRIVER ACKNOWLEDGEMENT OF RECEIPT My signature acknowledges receipt of this Administrative Citation and does not indicate either innocence or guilt of the above violation.		
-	Driver Signatu	re .	Telephone