

Please Date the Form

M 43515

RELEASE OF AUTHORITY FOR CANCELLATION

TV-082184

TO: Washington Utilities and Transportation Commission
Licensing Services
P.O. Box 47250
Olympia, WA 98504-7250
(360) 664-1222 or fax @ (360) 586-1181

The undersigned, holder of Permit/certificate number(s):
G _____ C _____ CH/ES _____
CC 61671 HG _____ TCC _____
OTHER _____

Does hereby declare that the authority is no longer being used and is hereby surrendered to the Commission for cancellation. (Attach original permit or certificate, if available)

Robert Jife * 12-9-08
SIGNATURE OF CARRIER DATE

B R Ranches Robert Jife
NAME OF CARRIER (Please print)

341 Gibson
ADDRESS

Selah, WA 98942
CITY-STATE-ZIP

509-697-5805
(AREA CODE) - PHONE NUMBER