

REGULATORY FEE CALCULATION SCHEDULE

Due May 1, 2014

Company Name LUDTKE - PACIFIC TRUCKING, INC Annual Report Year 2013

In accordance with RCW 81.77.080 "Regulatory Fees", the Commission requires Solid Waste 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 revenue for the preceding year and pay to the Commission a fee as instructed below.

Regulatory Fee Calculations

1 Total Gross Intrastate Operating Revenue** 84782 84

2 If Line 1 is UNDER \$2,000, enter ZERO and skip to Line

3 If Line 1 is OVER \$2,000 - enter amount from Line 1 x .4275% 84782 84 x 0.004275 362 45

4 Total Regulatory Fees owed (enter Line 2 or 3) 362 45

Agency Use Only 001-111-0268-227-01

Penalty & Interest Calculations

5 Penalties on Regulatory Fees being paid after May 1

5a Total Penalties on Regulatory Fees owed (enter amount from Line 4 x 2%) _____ x 0.02 _____

6 Interest on Regulatory Fees being paid after May 31

6a Amount from Line 4 x Number of months past May 31 x 1% _____ x _____ x 0.01 _____

7 Total Penalties and Interest owed (Line 5a plus Line 6a) _____

8 Total Regulatory, Penalties and Interest Fees Due (Line 4 plus Line 7) _____

Agency Use Only 001-111-0268-227-11

****Note:** Gross Washington intrastate operating revenue is defined as all revenue collected for the year from rates under tariffs, and contracts on file at the Washington Utilities and Transportation Commission. 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.

COMMISSION USE ONLY

Reception #:	_____	001-111-0268-227-01	_____
Reference:	<u>AR2013</u>	001-111-0268-227-11	_____
Payment ID:	_____	001-111-0268-032-20	_____
		Total Paid:	_____

PAYMENT INFORMATION

TYPE OF PAYMENT - DO NOT SEND CASH IN THE MAIL

Check / Money Order

Online Payment Confirmation Number: _____

Credit Card Card Type: VISA

CC#

Exp Date - MM/YYYY: 07/2014

CERTIFICATION: I, the undersigned, under penalty for false statement, certify that the information is true, valid and correct, that I am authorized to execute on behalf of the applicant, and that I agree to pay the total amount due as shown on the regulatory fee calculation schedule according to the card issuer agreement.

Name: Lloyd A. Knutke Title: PRESIDENT

Signature: [Handwritten Signature] Date: 5/1/14

END OF REPORT
