

**BEFORE THE WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION**

**PROOF OF SERVICE**

**DOCKET 190171**

I HEREBY CERTIFY That I, as an employee of the Washington Utilities and Transportation Commission at Olympia, Washington, have served on 3/13/2019 the parties of record in this proceeding a true copy of the following document(s):

Permit cancel for Insurance

The document(s) was/were mailed to each of the parties of record in this docket. Each envelope was addressed to the address shown in the official file, with the required first class postage, and deposited on this date in the United States mail in the City of Olympia, County of Thurston, State of Washington.

*/s/ Pam Chiles*

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Pam Chiles, Customer Service Specialist

**PARTIES OF RECORD AND OTHERS RECEIVING NOTICE**

**SERVED BY MAIL:**

Mailed to:  
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