

ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

Your application must include at least three shipper or public statements supporting the proposed household goods moving service. Shipper statements may come from persons or organizations with a need for household goods moving services, or who support your request for a permit to provide those services. These forms may be copied by you as needed.

Applicant Name: Kenneth L Smysor - Melissa's Movers, LLC

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: GARY TURNER - INSURANCE AGENT

Address (include street address, mailing address, city, state, zip, and county):
1403 Auburn Way S #61 Auburn, WA 98002

Phone Number:

Do you currently need the services of a residential household goods moving company?
 No Yes If yes, please describe your current moving needs:

Do you anticipate a future need for the services of a residential household goods moving company?
 No Yes If yes, please describe your future moving needs:
Moving office location at some point

Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community: Ken is a Respected member of our city & his services will provide AFFORDABLE moving services for a vast number of local persons

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit? I would recommend this person as an honest & trustworthy individual I have done business w/ for some time

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

[Signature]
Signature of Person Completing Form

4/21/09 Auburn, WA
Date and Location