

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: CBC TRUCKING LLC 090627

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:
JOSHUA IVAN LASTER, OWNER/OPERATOR, LASTER GLASS CO.

Address (include street address, mailing address, city, state, zip, and county):
1806 E. FOURTH PLAIN BLVD #14, VANCOUVER, WA 98061
CLARK COUNTY

Phone Number:
(360) 910-8333

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:
HOUSEHOLD MOVING BY QUALIFIED MOVERS ARE ALWAYS IN GREAT DEMAND.

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:
BY PROVIDING INSURED, AND EXPERIENCED MOVERS, CBC TRUCKING WILL FULLFILL THE MOVING NEEDS OF THE COMMUNITY.

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?
I'VE KNOWN CEASER BURMUEZ FOR FIVE YEARS, AND HAVE LEARNED A LOT ABOUT MOVING AND HANDLING FURNITURE SAFELY AND PROPERLY FROM HIM.

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

5/19/09 VANCOUVER, WA
Date and Location

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: CBC TRUCKING LLC 090627

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: Jasen Nash, Ops mgr, Exel Direct

Address (include street address, mailing address, city, state, zip, and county):
15011 N Lombard St
Portland, OR 97203

Phone Number: 503-285-6785

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:

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:
By granting the permit, we will be able to deliver mts to the end consumer.

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.
Jasen Nash 5/19/09 Portland OR
Signature of Person Completing Form Date and Location

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: CBC TRUCKING LLC 090627

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: Brent William Miller - Miller Furniture Repair

Address (include street address, mailing address, city, state, zip, and county):
15519 NE. 50th Circle
Vancouver, WA 98682

Phone Number: 503.806.9512

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:
Household.

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:
I've worked along side of Cesar at Exel Direct for years & I would trust him with my belongings.

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit? Cesar is very conscientious & careful with furniture & people's homes.

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.
[Signature] 05-19-09 Vancouver, WA
Signature of Person Completing Form Date and Location