

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:

SKINNY WIMP MOVING CO. VANCOUVER

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:

MICHAEL DELL

Address (include street address, mailing address, city, state, zip, and county):

12280 SW HORIZON BLVD #301
BEAVERTON OR 97007

Phone Number:

503-840-7537

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: I WILL BE MOVING THIS SUMMER AND WILL NEED SERVICE TO VANCOUVER.

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:

THIS IS A LICENSED COMPANY WITH A PROVEN TRACK RECORD. I WOULD PREFER TO USE THIS COMPANY IT WILL GIVE ME REASSURANCE THAT MY PROPERTY WILL BE TRANSPORTED SAFELY AND PROPERLY.

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.



Signature of Person Completing Form

3-14-18

Date and Location

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Applicant Name:

Skippy Wimp Moving Co. Vancouver
Dorothy Gasque for Congress

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name: Dorothy Gasque, Candidate, Dorothy Gasque for Congress

Address (include street address, mailing address, city, state, zip, and county):

606 Main St

605 Main St #1065

Vancouver, WA 98660

Vancouver, WA 98660

Phone Number:

(360) 261 3730

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:

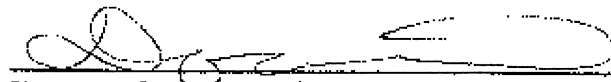
Briefly describe how granting this company a permit to provide household goods moving services in Washington State will benefit you, your business, and/or your community:

More competition in the market is good for consumers,
because of competitive pricing.

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

NO

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



Signature of Person Completing Form

3/10/18

Date and Location

ATTACHMENT A

HOUSEHOLD GOODS STATEMENT OF SUPPORT

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Applicant Name: *Skippy Wimp moving Co Vancouver*

The following must be completed by the Supporter of the applicant

Name, Title, and Business Name:
Gene Livingston

Address (include street address, mailing address, city, state, zip, and county):
605 Main Vancouver, WA 98666

Phone Number: *602-615-9415*

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

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:
More competition is better

Is there anything else the Commission should consider when making a determination about this company's application for a household goods permit?
6

I certify (or declare) under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.
Gene Livingston
Signature of Person Completing Form *3/11/18*
Date and Location