

**BEFORE THE WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION**

**PROOF OF SERVICE**

**DOCKET 190173**

I HEREBY CERTIFY That I, as an employee of the Washington Utilities and Transportation Commission at Olympia, Washington, have served on 3/15/2019 the parties of record in this proceeding a true copy of the following document(s):

Rescind 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**

Mailed to:

Cummins, Jeffery K.  
d/b/a Community Waste & Recycling  
157 Black Bird Lane  
Chehalis, WA 98532

**SERVED BY MAIL:**

No recipients has been served by mail

**NOTIFIED BY E-MAIL:**

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