BOISE CASCADE BARGE LINES, INC.

Inland an Coastel Waterways (Class C Water Carriers) ANNUAL REPORT TO THE INTERSTATE COMMERCE COMMISSION

Annual Report Form W-3 APPROVED BY GAO B-180230 (R0405) EXPIRES 12-31-79

(Date Due March 33, 1979)

I CORRECT NAME AND AL	DORESS IF DIFFERENT TEAN SHOWN	NAME AND ADDRESS OF REPORTING CARRIER (Actach label of int from cover on original copy in fell on displicate)
Boise Cascade P.O. Box 7747 Boise, ID 83		
2 Did respondent cond Yes	uct its husiness, or any part there it it	uring the sear under a name or names other than that indicated in licin to
3. Type of menership to	state if individual owner portnership	Corporation association cic i
4. Facosporation asses Washington		prise give date of organization and name state in which organized. State of
5 Give the names add	ress, and marare of business of att.	a) holding (h) subsidiary, (c) affiliated, and (d) associated companies
7. Location of operation regular services	A State the names of parts pried herw Lake Roosevelt on Cul- mancial and operating dain for the ye e equipment used or held for use and harges, vessels, etc. Show cargo carry s employed by respondent in connec	defferson Square, Boise, ID 83728 pany create (passenger or property or both). Towing Rights con or bruched to regular service or general tetribury served it ma ports of umbia River car requested in the following schedules. Under Schedule 400. Floating indicate the character of title as either owned or leased from others, also ing capacity in tons of 2,000 bbs. In Schedule 500. Employees, state the tion with its carrier operations for the services and on dates indicated uld be shown in units of dollars adjusted to accord with footings.
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9 Att settler textrastic		15,125.27
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None		Description of item on respondent's record	Character of title	Year acquired	Rated horsepower of engine	Cargo carryin capacity - Tot (2,000 lbs.)	ns carrying capa-
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3 4 5 5 6 500 Employees Soo Employees Line Item Mar 31 June 30 Sept. 30 D (c) (d) None None None None None None None None		None					i
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1 Employees on vessel(s), number of None None None	No. 1	CONTRACTOR OF THE PROPERTY OF			NT	None	None

Domestic Truffic

to administer oaths)

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Line Item	Foreign traffic	Regulated	Unregu	Total
(a)	(b)	(c)	inted (d)	(e)
1 Tons of revenue freight carried (2,000 lbs.)				None
2 Number of revenue passengers carried				None
3 Commodities, 6 principal, handled in domes				None
9. Give a concise statement of important changes year, such as transfer of ownership, leasing This is first report filed s in 1978.	of property and ve	seels, location of oper	rations, financial ar	rangements, etc.
10. Name, title, telephone number and address of	of the person to be	contacted concerning	this report	
NAME Cecil D. Ingram		nne Manager	, Administra	tive Services
TELEPHONE NUMBER	208	/384-7214	(Yelephone number	,
OFFICE ADDRESS One Jefferson	Square, Bo	oise, ID 8372	8	
OFFICE ADDRESS	Gereet and numbe	7 0012	(Chy. Same, and ZIF C	<i></i>
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Idaho		or the accounting of	the impondent)	
STATE OF	——)			
COUNTY OF Ada	#45			
Cecil D. Ingram				
	nsert here the nam	ne of the affiant)	makes oa	th and says that he is
		ge Lines, Inc.		
(Title of affiant)	(Insert here the e	xact legal title or nam	se of the responder	11)
that it is his duty to have supervision over the bookept; that he has carefully examined the said report have, so far as they relate to matters of account, beewith, that he believes that all other statements of complete statement of the business and affaincluding. January 1 December 31	t and to the best of n accurately taken f fact contained in th	his knowledge and beli from the said books of a te said report are true.	ef the entries conta- account and are in ea- and that the said to	ined in the said report fact accordance there- eport is a correct and of time from and — to and including
Subscribed and sworn to before me, a this 22nd day of May	Notary Publ	My commiss	for the State and	
Piace Impression Seal		(5)		

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FOLLOW ALL INSTRUCTIONS CAREFULLY

- I. Remove the mailing label from the cover and attach the label to the top of page I of the report form to be filed. The mailing label should NOT be altered. If the name and address on the mailing label are incorrect, insert your correct name and address in the space provided to the left. The carrier mailing address is the company address where correspondence regarding accounting and reporting matters is to be directed, but not the address of an independent auditor or CPA.
- 2. Three copies of this form for annual report the ratio be filled out and two copies returned, the original of which must be the copy containing the mailing label, to the Bureau of Accounts, Interstate Commerce Commission. Washington, D. C. 20423, by March 31 of the year following the year for which the report is made, one copy should be retained by the carrier for reference. The report is required of water carriers whose average annual operating revenues are \$100,000 or less, in accordance with the provisions of Suction 313(a) of Part III of the Interstate Commerce Act.
- 3. For those water carrier, subject to the jurisdiction of the Interstate Commerce Act having overage annual operating revenues exceeding \$100,000 annual report Form W-1 and Maritime carriers annual report Form W-4 toye been provided.
 - 4. Unless otherwise explained, the carrier should report its

- entire operations for the year of the report including intrastate and exempt interstate transportation. If operations are for a period less than a year, the report should so indicate
- 5. Full and accurate replies should be made to all items and schedules. If an item is not applicable to the respondent, or if the word "none" fairly and completely applies, the report should so indicate. If records are not available for any item or part thereof, which give the information called for, respondent should report the best estimate possible and mark such items "escimated."
- 6. Wherever the space provided is insufficient to permit full and complete reply to the requested information, such replies should be prepared on inserts, appropriately referenced and securely attached to the report or the reply can be continued in the space in the report for "Remarks."
- 7. If respondent prepares statements of its income, surplus, general balance-sheet or operations for the year or any part thereof of the report, one copy of each such statement shall be filed with this report or submitted to the Commission as and when available.
- 8. Inquiries relative to the proparation and filing of the report should be addressed to the Burran of Accounts at above address.

REMARKS

BOISE CASCADE BARGE LINES, INC. Balance Sheet December 31, 1978

ASSETS		LIABILITIES		
130 Investment in Affiliated Co. 151 Acquisition Adjustment	\$8,625.27 \$8,660.00 7,500.00	206 Accrued Taxes	0- 0-	0-
		RESERVES		
		223 Amortization Revenues Intangibles	\$ 1,000.00	\$ 1,000.0
		EQUITY		
		240 Common Stock 280 Retained Earnings 281 Net Income or (Loss)	\$15,000.00	\$15,000.0
		Total Equity	\$15,125.27	\$15,160.0
Total Assets	\$16,125,27 \$16,160.00	Total Liabilities and Equity	\$16,125.27	\$16,160.0

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BOISE CASCADE BARGE LINES, INC. December 31, 1978 Income Statement

301 Freight Revenue

BUINGET

YEAR-TO-DATE ACTUAL BID

BUDGET

ACTUAL

CURRENT MONTH

303 Other Line Service Revenue

Terminal Revenue 331

Total Revenue

EXPENSES

401 Maintenance of Vessels and Other Property

Depreciation and Amortization

Operation of Vessels 121

Lay-up Expenses 133

Terminal Expenses

991

General Expenses Traffic Expenses 191

\$ 40.00

assistifies and Insurance

Charter and Other Rents

Payroll and Other Water Line Accruals

\$ 40.00 \$ 39.50 Total Expenses

NET REVENUE OR (LOSS) WATER-LINE OPERATIONS

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281 NET INCOME OR (LOSS)

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