Rate Bureaus and Organizations

1978

Date Due: March 31, 1979

COMMERCE COMMISSION RECEIVED

JUN 28 1979

ADMINISTRATIVE SERVICES

ANNUAL REPORT FORM RBO

Approved by GAO B-180230 (R0257) Expires 5-31-82

Check one Class I | Class II |

ANNUAL REPORT TO THE INTERSTATE COMMERCE COMMISSION

CORRECT NAME AND ADDRESS IF DIFFERENT THAN SHOWN (See instructions)

RBO54005 HEAVY SPEC 1 0 1 0
HEAVY & SPECIALIZED CARRIER TARIFF
SUITE 711
1155 16TH STREET N.W
WASHINGTON DC 20036

FOLLOW ALL INSTRUCTIONS CAREFULLY

1. Remove the mailing label from the cover and attach the label to the top of page 1 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 CAP.

2. All conferences, Eureaus, committees, or other organizations, subject to Section 5a or Section 5b (49 U.S.C. \$10706) Part 1 of the Interstate Commerce Act, are required to file annual report Form RBO. This Form for annual report should be filled out in triplicate and 2 copies, the original of which must be the copy containing the mailing label, returned to the Interstate Commerce Commission. Bureau of Accounts, Washington, D.C. 20423, by March 31 of the year following the year for which the report is made. One copy is to be retained for reference in cast of correspondence relative to the report Attention is directed to Section 5A. Part 1 of the Interstate Commerce Act.

3 Carrier rate-making organizations as described in instruction 2, above, are classified into two classes. Class I rate bureaus are those with annual operating revenues of \$100,000 or more. Class II rate bureaus are those with annual operating revenues of less than \$100,000 Class I rate bureaus shall file the full report. Annual Report Form RBO. Class II rate bureaus shall file only the carrier statistics (ITEMS 1-9) and certification (page 4) portions of the Annual Report Form RBO.

4. The instructions in this Form should be excefully observed, and each question should be answered fully and accurately, if any inquiry does not apply to the respondent, such fact should be shown on the inquiry of the words "Not applicable." Where the word "None" truly and completely states the fact, it should be given as the answer to any particular inquiry or any particular portion of any inquiry. Where dates are called or, the month and day should be stated as well as the year. Customary abbreviations may be used in stating dates.

5. If it is necessary or destrable to insert additional statements, typewritten or other, in a report, they should be legibly made on durable paper, on sheets not larger than a page of the Form. The inserts should be securely bound in the report.

6. All entries must be made in permanent black ink. Those of a contraty and unusual character must be indicated by use of parentheses.

7. Proughout this report the Commission means the Interstate Commerce Commission, the respondent means the rate bureau or organization in whose behalf the report is made, the year ended December 31 for which the report is made, the close of the year means the close of business on December 31 of the year for which the report is made or, in case the report is made for a shorter period than one year, it means the close of the period covered by the report, the beginning of the year means the beginning of business on January 1 of the year for which the report is made or, in case the report is made for a shorter period than one year, it means the beginning of the period covered by the report.

8. Should there be doubt as to the reporting of any item or stems or parts thereof, or advice is desired relative to the preparation of the report, address an inquiry to the Bureau of Accounts for consideration and decision.

	respondent was organi	If incorpora zed and the date	of lates!	t approved or amended	agreement.
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. State type on			7	S 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	magniler, etc./
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<u> </u>	Number taken without filing of proposals		Proposition to Proposition and Advanced to the Control of the Cont
Da .	Number taken after filing of regular or emergency proposals	****	16
O. BAL	ANCE SHEET		
INE NO.	ITEM	BALANCE AT CLOSE OF YEAR	BALANCE AT BEGINNING OF
	ASSETS		
1,	Current Assets	8 17,846	\$ 27,877
2.	Cash	170	200
3.	Accounts Receivable	110	200
4	Notes Receivable		
5.	Other Current Assets	60.488	42,639
6.	Total Current Assets	78,504	70,716
	Fixed Assets		
7.	Total Fixed Assets (Net of \$accumulated	None	None
	depreciation and amortization)	110126	None
	Other Assets		
3.	Total Other Assets	None	None
9.	TOTAL ASSETS	78.504	70,716
	LIABILITIES AND EQUITY		
	Current Liabilities		
0	Notes Payable	1 026	486
1,	Other Current and Accrued Liabilities	1,036	28,267
3.	Total Current Liabilities	31,921	28,753
	Other Liabilities		
4.	Long Term Debt Due After On Year	None	None
5.	Other Liabilities		
5	Total Other Liabilities		
	Equity	46,583	41 963
1	Membership Equity	78,504	41,963
B	TOTAL LIABILITIES AND EQUITY	70,304	70,710

11. INCOME STATEMENT

State, in dollars only, the receipts and disbursements of the respondent for the year.

LIME NO.	ITEM	(poliars Only)
	OPERATING REVENUES:	. 60 137
1.	Membership Fees	17,307
	Tariff Fees	2 006
	Other Income (Dist individual items in axcess of \$85,000)	21000
	Tetal Describes Described	80,530
	Total Operating Revenues	1
	OPERATING EXPENSES:	
7.	Salaries and Wages	
	Employee Benefits	
9.	Payroll Taxes	
10.	Depreciation and Amortization	
11.	Property and Other Taxes	30,910
12.	Other (List individual items in excess of \$35,000)	+
13.	Administrative Expense	45,000
14.		
15.		75,910
16.	Total Operating Expenses	4,620

12. Give the number of persons employed at the close of the year and the amount of rompensation paid or payable to all employees during the year by the respondent, classified as indicated.

LINE NO.	CLASSIFICATION	NO, DO PERS NS EMPLOYED : HE CLOSE OF YEAR	AMOUNT OF COMPENSATION
1.	Officers and Supervisors	None	\$
2.	All Other Employees		
3.	Total		
4.	Number of Employees Working With SRC		
5.	Number of Employees Working with GRC.		

202 797-5407 1155 - 16th St. N.W. Wash.D.C. 20036 CERTIFICATION
Wash.D.C. 20036
CERTIFICATION
Brymer
Heavy Specialized Carriers of the Tariff Bureau Company Ortal (Full name of reporting company) or under my supervision, that I have carefully examined it, and verification (where necessary). I declare it to be a full, true items here reported were determined in accordance with effect ree Commission.
1979 Signature To Sontello
REMARKS

NOT FOR PUBLIC INSPECTION

Give the name, position, salary, and other compensation, such as bonus, commission, gift, reward, or fee, of each of the five principal officers to whom the respondent paid the largest amount during the year covered by this report as compensation for current or past service over and above necessary expenses incurred in discharge of duties, and is addition, all other officers, directors, pensioners or employees, if any, to whom the respondent similarly paid \$40,000, or nore.

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	NONE				
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THIS ITEM IS AN INTEGRAL PART OF ANNUAL REPORT FORM RBD