RB-024005 SAN FRANCISCO MOVERS TARIFF BUREAU 1979

RBO24005

ORIGINAL

MAY 15 1980

ICC - P.O. 2040

Rate Bureaus and Organizations

1979

Date Due: March 31, 1980

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)

NAME AND ADDRESS OF REPORTING CARRIER (Attach label from front cover on original copy in full on duplicate)

San Francisco, Movers Tariff Bureau
7996 Capwell Drive
Oakland, California 94621

(No Label Included.)

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, bureaus, committees, or other organizations, subject to Section 5a, or Section 5b (49 U.S.C. §10706) Part I 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 case of correspondence relative to the report. Attention is directed to Section 5A, Part I 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 carefully 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 by 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 for, 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 desirable 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 contrary and unusual character must be indicated by use of parentheses.

7. Throughout 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 items 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.

1. Date organized 1953 If incorporated, give the name of State or States under whose laws the respondent was organized and the date of latest approved or amended agreement

2. State form of business organization, i.e., corporation, association, etc. Association

3. State type of transport affiliation *(railroad, motor carrier, water carrier, freight forwarder, etc.)*
Motor Carriers

4. Give the names and office addresses of directors, if any, of the respondent at the close of the year.

NAME	OFFICE ADDRESS
Jack Macy	2865 7th St., Berkeley, Ca 94710
William Edmonds	163 Yolano Dr., Vallejo, Ca 94590
Jack Gussey	1720 Broadway, Vallejo, Ca 94590

5. Give the names, title (if any), and office address of all general officers of the respondent at close of the year.

NAME	TITLE	OFFICE ADDRESS

6. Give the list of members comprising the rate bureau or organization at end of the year and specifically name carriers added to or deleted from the membership over the past year. 49 Members as of 12/31/79. Deletions by Alpha Code DITV-FWNO-JMST-MCGS-NIKL-SWOF
New members by Alpha Code MOPM

7. Status of proposals submitted during the year.

LINE NO.	ITEM	NUMBER PENDING BEGINNING OF YEAR	NUMBER RECEIVED DURING YEAR	NUMBER DISPOSED OF DURING YEAR
a.	Regulatory Proposals 1/	0	0	0
b.	Emergency Proposals 1/	0	0	0
c.	Section 22 Proposals	0	0	0
d.	Foreign Line Proposals 2/	0	0	0
e.	Single Line Proposals	0	2	2
	TOTAL	0	2	2

8. Disposition of proposals during the year.

LINE NO.	ITEM	NUMBER	
a.	Number placed on public docket	3	
b.	Number not placed on public docket	0	
		SRC	DRC
c.	Number of proposals pending more than 120 days	0	0
d.	Number referred to and disposed of by		3
e.	Adopted in part		3
f.	Rejected		0
g.	Withdrawn		0

1/ *Including those submitted by respondent, member or concurring carrier, or shipper.*
2/ *Proposals submitted by non-member carriers or by other rate organizations.*

11. INCOME STATEMENT

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

LINE NO.	ITEM	AMOUNT (Dollars Only)
	OPERATING REVENUES:	
1.	Membership Fees	$ 1820
2.	Tariff Fees	567
3.	Other Income (List individual items in excess of $25,000)	
4.	Tariff Publication and Distribution fees	5557
5.		
6.	Total Operating Revenues	7944
	OPERATING EXPENSES:	
7.	Salaries and Wages	
8.	Employee Benefits	
9.	Payroll Taxes	
10.	Depreciation and Amortization	
11.	Property and Other Taxes	
12.	Other (List individual items in excess of $25,000)	
13.	Legal Fees	488
14.	Tariff Publication and Bad Debts	5154
15.	Agents Fees	2302
16.	Total Operating Expenses	7944
17.	Net Income	0

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

LINE NO.	CLASSIFICATION	NO. OF PERSONS EMPLOYED AT THE CLOSE OF YEAR	AMOUNT OF COMPENSATION
1.	Officers and Supervisors	3	$ 0
2.	All Other Employees	0	0
3.	Total	3	0
4.	Number of Employees Working With SRC	0	0
5.	Number of Employees Working with GRC	0	0

9. Independent actions filed with respondent during the year.

LINE NO.	ITEM	NUMBER
a.	Number taken without filing of proposals	4
b.	Number taken after filing of regular or emergency proposals	1

10. BALANCE SHEET

LINE NO.	ITEM	BALANCE AT CLOSE OF YEAR	BALANCE AT BEGINNING OF YR.
	ASSETS		
	Current Assets		
1.	Cash	$ 1049	$ 2338
2.	Accounts Receivable		
3.	Less: Allowance for uncollectible accounts		
4.	Notes Receivable		
5.	Other Current Assets		
6.	Total Current Assets	1049	2338
	Fixed Assets		
7.	Total Fixed Assets (Net of $ ______ accumulated depreciation and amortization)		
	Other Assets		
8.	Total Other Assets		
9.	TOTAL ASSETS	1049	2338
	LIABILITIES AND EQUITY		
	Current Liabilities		
10.	Notes Payable		
11.	Accounts Payable		
12.	Other Current and Accrued Liabilities		
13.	Total Current Liabilities		
	Other Liabilities		
14.	Long Term Debt Due After One Year		
15.	Other Liabilities		
16.	Total Other Liabilities		
	Equity		
17.	Membership Equity		
18.	TOTAL LIABILITIES AND EQUITY	1049	2338

Name, title, telephone number and address of the person to be contacted concerning this report.

NAME R. D. Vinick TITLE Tariff Publishing Officer

TELEPHONE NUMBER *(Include Area Code)* (415) 635-7202

OFFICE ADDRESS *(Street and number)* 7996 Capwell Drive

(City, State and Zip Code) Oakland, Ca 94621

CERTIFICATION

I, the undersigned R. D. Vinick,

Tariff Publishing Officer of the San Francisco Movers Tariff Bureau Company
(Title of officer in charge of accounts) *(Full name of reporting company)*

state that this report was prepared by me or under my supervision, that I have carefully examined it; and on the basis of my knowledge, belief and verification (where necessary) I declare it to be a full, true and correct statement and that the various items here reported were determined in accordance with effective rules promulgated by the Interstate Commerce Commission.

Date May 12, 1980 Signature R. D. Vinick

REMARKS

This space is for the use of the Interstate Commerce Commission only.