FF-000007 W.J.BYRNES &COMPANY OF NEWYORK INC. 1979

FF000007

ORIGINAL

ANNUAL REPORT TO THE

INTERSTATE COMMERCE COMMISSION

Freight Forwarders
(Class B)

1979

Date Due March 31, 1980

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

RECEIVED
APR 1 1980
ICC - P.O. 2040

NAME AND ADDRESS OF (label from front cover duplicate)
FF000007 BYRN
W. J. BYRNES & COM
15TH FLOOR
30 VESEY STREET
NRE YORK N.Y.

2. State whether respondent is an individual owner, partnership, corporation, association, etc.

3. If a partnership, state the names and addresses of each partner including silent or limited.

Name	Address

4. If a corporation, association or other singular form of enterprise, give the date and State of

Date JUNE 18 19 18 State of NEW YORK

Give the names and titles of principal general officers

Name JOSEPH A. GUNTHER Title PRES.
Name JOHN A. SWENSON Title SEC.
Name E.J. SHERIDAN Title VICE PRES.

5. If respondent is a corporation or association, give for each of its five largest stockholders at close

Name	Address
JOSEPH A. GUNTHER SOLE STOCKHOLDER	689 RIVER ROAD TEANECK, N.J. 07666

6. Disclose fully any affiliation or connection of the forwarder with any rail, motor, or water carrier uses the services of a freight forwarder.

7. Give the names of States in which traffic is originated and/or terminated.

Annual Report Form
F-2
Approved by GAO
B-180230 (R0153)
Expires 12-31-81

131221

REPORTING CARRIER (Attach
on original, copy in full on

S COMP B OB O
'ANY OF NEWYORK INC

10007

ORPORATION

id their interests:

	Proportion of Interest

ncorporation or organization:

of year the following information

	Number of votes to which entitled
	100

or with any shipper that commonly

Schedule 13.—SUMMARY OF FREIGHT LOSS AND DAMAGE CLAIMS

This schedule was adopted by the Commission in No. 35345 (Sub-No. 2) July 1, 1977.

Approved by GAO Effective 12-23-77

Exclude from this schedule the revenues and claims incurred in connection with freight forwarder services and shipments which have a prior or subsequent movement by air. Line 1 should show all freight forwarder revenue in Account 501. Line 2 should show the number of claims paid during the year for robbery, theft and pilferage, and other shortage as defined below.

Robbery - Failure to deliver all or part of a shipment as the result of stealing, including hijacking, with the use of force or threat of force against a person or persons. Claims for physical damage to freight in the same or other shipments resulting from robbery should be reported under Robbery.

Theft and Pilferage - Failure to deliver all or part of a shipment as the result of known stealing, or under circumstances indicating the probable cause was stealing, without use of force or threat of force against a person or persons, when it is known the freight was in the carrier's custody. (Note: Claims for physical damage to freight in the same or other shipments resulting directly from theft or pilferage should be reported under Theft and Pilferage.

Other Shortage - Failure to deliver all or part of a shipment for unknown reasons. This includes the unexplained disappearance of all or part of a shipment for reasons other than robbery or theft and pilferage as defined above.

Line 3 should show the number of all other claims paid in full or in part during the year not reported on line 2.

Line 4 should include the *net* dollar amount of claims paid during the year. This includes claims paid in full or paid in part, less amounts recovered from underlying carriers, salvage, insurance, and claim refund cancellations.

Line 5 show the ratio in percentage form (two decimal places).

Line No.	Item (a)		
1	Freight revenue (Account 501)	$	
2	Number of theft related claims paid		
3	Number of other claims paid		
4	*Net* dollars paid (See instructions)	$	
5	Claims expense/revenue ratio (line 4 ÷ 1)		%

8. Balance close of year: Total assets $ 1,006,987.58 ; Total liabilities $ 869,381.96

Capital stock $ 100,000.00 ; Proprietorial capital $; Surplus $ 37,605.62

9. Give the amount of revenue from and expenses of forwarder operations during the year, classified as follows:

Revenue: From shippers $ NONE ; Others $ NONE Total $ NONE

Less: Transportation purchased $ NONE

Net forwarder revenue $ NONE

Expenses: Total expenses including taxes other than income taxes $

10. State the number of employees that were regularly employed during the year 34

11. Give a concise statement of important changes during the year affecting comparisons of returns in this report with report of previous years, such as transfer of ownership, leasing of property and equipment, location of operations, financial arrangements, etc.

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

NAME ANTHONY M. ANZALONE TITLE TREASURER

TELEPHONE NUMBER 212-349-3950 (Area code) (Telephone number)

OFFICE ADDRESS 30 VESEY STREET NEW YORK N.Y. 10007 (Street and number) (City, State, and ZIP Code)

OATH

(To be made by officer having control of the accounting of the respondent)

State of NEW YORK)

County of NEW YORK) ss:

JOSEPH A. GUNTHER (Insert here the name of the affiant) makes oath and says that he is PRESIDENT (Insert here the offical title of the affiant)

of W.J.BYRNES & COMPANY OF NEW YORK INC. (Insert here the exact legal title or name of the respondent)

that it is his duty to have supervision over the books of account of the respondent and to control the manner in which such books are kept; that he has carefully examined the said report and to the best of his knowledge and belief the entries contained in the said report have, so far as they relate to matters of account, been accurately taken from the said books of account and are in exact accordance therewith; that he believes that all other statements of fact contained in the said report are true, and that the said report is a correct and complete statement of the business and affairs of the above-named respondent during the period of time from and including JAN. 1, 19 79, to and including DEC. 31, 19 79.

(Signature of affiant)

Subscribed and sworn to before me, a NOTARY PUBLIC, in and for the State and county above named, this 28 day of March, 80. My Commission expires March 30 - 82

(Signature of officer authorized to administer oaths)

Use an L.S. Impression Seal

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, address, and FF number 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 any independent auditor or CPA.

2. All freight forwarders having average annual gross operating revenues of less than $100,000 are required to file Form F-2. Three copies of this form should be filled out and two copies, the original of which must be the copy containing the mailing label, returned 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. The remaining copy should be retained by the carrier for reference.

3. Unless otherwise explained, the carrier should report its entire operations for the year of the report. If operations are for less than a year, the report should so indicate under remarks.

4. Full and accurate replies should be made to all items and schedules. Money items should be shown in units of dollars.

5. Annual report form F-1 is prescribed for freight forwarders having average annual gross operating revenues of $100,000 or more.

6. Inquiries concerning the reporting requirements or preparation of the report should be addressed to the Bureau of Accounts at the above address.