

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

7008 3230 0003 0726 5974

Postage	\$	9/14/11 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total: Keith Gilstrap Gilco Transportation, Inc. P. O. Box 1061 Rifle, CO 81650 DOCKET NO.: CWA-08-2011-0027		
Sent To		
Street, or PO		
City, St		

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: **SEP 14 2011**

Keith Gilstrap
Gilco Transportation, Inc.
 P. O. Box 1061
 Rifle, CO 81650
DOCKET NO.: CWA-08-2011-0027

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Keistie Bhashaw

B. Received by (Printed Name) C. Date of Delivery
Keistie Bhashaw

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article **7008 3230 0003 0726 5974**