

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

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OFFICIAL USE

7006 2760 0000 8645 8698

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	

Postmark

Restricted Delivery
(Endorser) **Marvin G. Spees, President**
Capitol City Oil
Total Po **509 4th Street**
Wamego, Kansas 66547

Sent To _____
Street, Apt. _____
or PO Box # _____
City, State, ZIP+4 _____