

**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:

OCT 01 2008

Mr. George Eidsness, Registered Agent for  
TRANS-WEST, INC.  
7626 BRIGHTON RD,  
COMMERCE CITY, CO 80022

EAFL

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**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *George Eidsness*  Agent  Addressee

B. Received by (*Printed Name*)

C. Date of Delivery

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

Service Type

- Certified Mail  Express Mail
- Registered  Return Receipt for Merchandise
- Insured Mail  C.O.D.

4. Restricted Delivery? (*Extra Fee*)  Yes

2. Article Number 7007 3020 0003 3320 8590  
(Transfer from service label)

CAA-08-2008-0030