

7008 3230 0003 0729 7937

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

For delivery information visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Postage \$ \_\_\_\_\_  
 Certified Fee \_\_\_\_\_  
 Return Receipt Fee (Endorsement Required) \_\_\_\_\_  
 Restricted Delivery Fee (Endorsement) \_\_\_\_\_

Total Pk: \_\_\_\_\_

Sent To: **Dick Hinchliff, President**  
 Trailer Services, Inc.  
 P. O. Box 16722  
 2033 E. 58<sup>th</sup> Avenue  
 Denver, CO 80206

Street, Apt or PO Box: \_\_\_\_\_  
 City, State, ZIP+4: \_\_\_\_\_

DOCKET NO.: SDWA-08-2009-0072  
 Dick Hinchliff, President

Postmark Here: 9/1/09

PS Form 3811, August 2004 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:

Trailer Services, Inc.  
 P. O. Box 16722  
 2033 E. 58<sup>th</sup> Avenue  
 Denver, CO 80206  
 DOCKET NO.: SDWA-08-2009-0072  
 Dick Hinchliff, President

SEP 01 2009

2. Art (M) 7008 3230 0003 0729 7937 Extension

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
 X *Dick Hinchliff*

B. Received by (Printed Name)  Date of Delivery  
 KAY HINCHLIFF

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

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

4. Restricted Delivery? (Extra Fee)  Yes

PS Form 3811, February 2004 Domestic Return Receipt 10225-02-44-1346