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7009 3410 0000 2594 2358

Postage \$	5.87	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restrict (Endors)	<b>Greg Westlake, Manager</b> <b>Farmers Union Oil</b> <b>Kenmare Anhydrous Plant</b> Hwy 52 Kenmare, ND 58746	
Total		
Sent To		
Street, or PO I	DOCKET Nos.: CAA-08-2010-0028; 0032; 0030	
City, St		

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature X <i>Debra Edwards</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee
	B. Received by (Printed Name) _____ C. Date of Delivery 5-31-11
1. Article Addressed to: <i>MAY 27 2011</i> <div style="border: 1px solid black; padding: 5px; margin: 5px;">                     Greg Westlake, Manager                      Farmers Union Oil                      Kenmare Anhydrous Plant                      Hwy 52                      Kenmare, ND 58746                      DOCKET Nos.: CAA-08-2010-0028; 0032; 0030                 </div>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes
2. Article (Transit) <i>G7</i> 7009 3410 0000 2594 2358	CA/FOS