

7007 3020 0003 3320 9016

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

Postage	\$	12/03/08 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total
 Jeramie Spangle, Operator
 The Wrench Wizard
 14365 Hwy. 385
 Cheyenne Wells, CO 80810
 DOCKET NO.: SDWA-08-2008-0078

Sent
 Street or P.O.
 City

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: **DEC 03 2008**

Jeramie Spangle, Operator
 The Wrench Wizard
 14365 Hwy. 385
 Cheyenne Wells, CO 80810
 DOCKET NO.: SDWA-08-2008-0078

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 12.5.08

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

RC **C**

2. Article Number **7007 3020 0003 3320 9016**
 (Transfer from service)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540