

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 <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to: <b>AUG 14 2008</b>	B. Received by (Printed Name) <b>ED SWISHER</b> C. Date of Delivery <b>8-19-8</b>
<p><b>Ed Swisher, Owner</b>            Swisher Diesel and Automotive            31455 U. S. Hwy. 24            Buena Vista, CO 81211</p> <p>DOCKET NO.: SDWA-08-2008-0037</p> <p><i>RC P</i></p>	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No <div style="text-align: center;">  </div>
2. A C. <b>7007 2560 0002 6445 0927</b>	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.
PS Form 3811, February 2004	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <div style="text-align: right;"><b>CAIFD</b></div> Domestic Return Receipt <span style="float: right;">102595-02-M-1540</span>