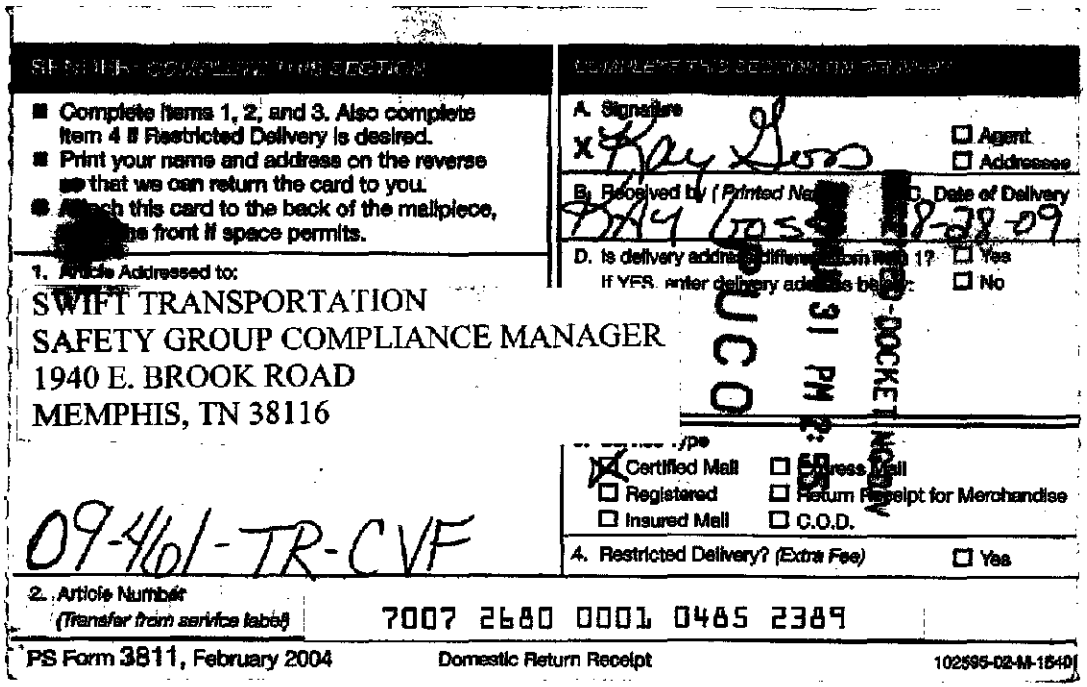
FILE



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:

SWIFT TRANSPORTATION
SAFETY GROUP COMPLIANCE MANAGER
1940 E. BROOK ROAD
MEMPHIS, TN 38116

09-461-TR-CVF

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Kay Goss
☐ Agent
☐ Addressee

B. Received by (Printed Name)
Kay Goss
C. Date of Delivery
8-28-09

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

FILED-DOCKETING DIV
2009 AUG 31 PM 2:58
PUCO

3. 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 (Transfer from service label) 7007 2680 0001 0485 2389

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

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business

Technician _____ Date Processed AUG 31 2009