

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. Conoco Phillips 76 Broadway Sacramento, CA 95818 Attn: Terry Grayson	A. Signature A. Signature A. Signature A. Agent Addressee B. Received by (Printed Name) Aress different from item 1? Addressee I Yes Addressee Priority Mail Express Registered Insured Mail Collect on Delivery Agent Addressee Received by (Printed Name) C. Date of Delivery Priority Mail Express Received Mail Collect on Delivery A. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7009 2820 PS Form 3811, July 2013 Domestic Re	eturn Receipt