

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

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OFFICIAL USE
Classification Order

7008 3230 0003 0726 3574

Postage	\$	2/6/2014 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total Postage \$

Daniel Schnee, Senior Counsel
 Legal Department El Paso Corp/Kinder Morgan
 Two Nevada Avenue
 Colorado Springs, CO 80903

Sent To
 Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

DOCKET NO.: CAA-08-2013-0015

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:

Daniel Schnee, Senior Counsel
 Legal Department El Paso Corp/Kinder Morgan
 Two Nevada Avenue
 Colorado Springs, CO 80903

DOCKET NO.: CAA-08-2013-0015

2. Article Number

7008 3230 0003 0726 3574

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

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

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

FEB 06 2014

order

102595-02-M-1540

Domestic Return Receipt