

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

7008 3230 0003 0726 5929

Postage	\$	7/28/11 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Post:	John Turner, Water Treatment Superintendent City of Fort Morgan Water Treatment Plant 14625 Road 8 Wiggins, CO 80654	
Sent To		
Street, Apt. 1 or PO Box N	DOCKET NO.: CAA-08-2011-0017	
City, State, Z		

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:

**John Turner, Water Treatment Superintendent
City of Fort Morgan Water Treatment Plant
14625 Road 8
Wiggins, CO 80654**

DOCKET NO.: CAA-08-2011-0017

JUL 27 2011

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name)
 John W. Turner

C. Date of Delivery
 7-28-11

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

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: 7008 3230 0003 0726 5929

CAFD

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540