	and the second s
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the restriction 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. 	A. Signature A. Agent Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below:
Russell George, Executive Director Colorado Department of Transportation	
4201 Arkansas Ave.	3. Service Type
Denver, CO 80222	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise
CWA-08- 2009-0010	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
CWA-CO 2007-001	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	
	turn Receipt 102595-02-M-1540