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 0729 5384

Postage	$ 6/23/10
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Postmark Here

Sent To

Street, Apt. No.; or PO Box No.

City, State, ZIP+4

Richard Margetts, Manager
Project 7 Water Authority
P. O. Box 1185 - 9128 E. Hwy. 50
Montrose, CO 81402

DOCKET NO.: CAA-08-2010-0008

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:

JUN 24 2010

Richard Margetts, Manager
Project 7 Water Authority
P. O. Box 1185 - 9128 E. Hwy. 50
Montrose, CO 81402

DOCKET NO.: CAA-08-2010-0008

C

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Richard L. Margetts ☐ Agent ☐ Addressee

B. Received by (Printed Name) Richard L. Margetts C. Date of Delivery 6-24-2010

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 (Transfer from s 7008 3230 0003 0729 5384

CAFO

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