MHA natio SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. A. Signature D Agent Print your name and address on the reverse Addressee so that we can return the card to you. C. Date of Delivery B Received by Attach this card to the back of the mailpiece 1217 10 or on the front if space permits. Yes them iten D very addre 1. Article Addressed to: enter delivery address below 7 TI No Es) CU 0 PE 0 11 Thomas W. Fredericks, Esq. P Fredericks Peebles & Morgan, Des 5 A 3 1900 Plaza Drive 3. Service Type Louisville, CO 80027 Certified Mail TO Express Mail Return Receipt for Merchandise Registered D Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) T Yes 2. Article Number 2003 7990 0000 2550 4774 (Transfer from service label) PS Form 3811, August 2001 Domestic Return Receipt 2ACPRI-03-P-4081