

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

For delivery information visit our website at www.usps.com®

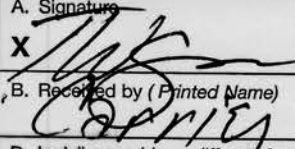
OFFICIAL USE

7008 3230 0003 0728 0083

| | | |
|---|--|----------|
| Postage \$ | | 10/30/14 |
| Certified Fee | | |
| Return Receipt Fee | | |
| Recipient (End) Cheryl A. Peterson, Esq. Riggs Abney Neal Turpen Orbison & Lewis To: 50 South Steele Street Suite 600 Denver, Colorado 80209 DOCKET NO.: CWA-08-2014-0032 | | Postmark |
| Sent Street or PO City | | |

PS Form 3800, August 2006

See Reverse for Instructions

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
|---|---|
| <ul style="list-style-type: none"> 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. | A. Signature X  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee |
| 1. Article Addressed to: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Cheryl A. Peterson, Esq. Riggs Abney Neal Turpen Orbison & Lewis 50 South Steele Street Suite 600 Denver, Colorado 80209 DOCKET NO.: CWA-08-2014-0032 </div> | B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No |
| 2. Article (Transit) 7008 3230 0003 0728 0083 | 3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. |
| PS Form 3811, February 2004 | 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes |

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540