

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

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

7012 2210 0000 5367 5173

|                                                   |    |
|---------------------------------------------------|----|
| Postage                                           | \$ |
| Certified Fee                                     |    |
| Return Receipt Fee<br>(Endorsement Required)      |    |
| Restricted Delivery Fee<br>(Endorsement Required) |    |
| Total Postage & Fees                              |    |

*CAPO*  
 Postmark Here  
 7/18/17

Pete Regalado, President  
 Regal Construction Inc.  
 1017 South Johnson Street  
 Lakewood, CO 80226  
 TSCA-08-2017-0008

Sent To  
 Street, Apt. No.,  
 or PO Box No.  
 City, State, ZIP+4

PS Form 3800, August 2003

**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: **JUL 19 2017**  
 Pete Regalado, President  
 Regal Construction Inc.  
 1017 South Johnson Street  
 Lakewood, CO 80226  
 TSCA-08-2017-0008

*CAPO* **(F)**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
 B. Received by (Printed Name) C. Date of Delivery  
 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 service label) 7012 2210 0000 5367 5173