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**Send To:**  
**Andrew R. Joppa**  
 Mountain States Employer's Counsel  
 Attorney for United Power, Inc.  
 1799 Pennsylvania Street  
 Denver, CO 80201-0539  
**DOCKET NO.: TSCA-08-2007-0014**

PS Form 3811, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <i>Sandy Moffitt</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery  <b>OCT 25 2007</b></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No        If YES, enter delivery address below:</p>
<p>1. Article Addressed to:  <b>OCT 24 2007</b></p> <p><b>Andrew R. Joppa</b>        Mountain States Employer's Counsel        Attorney for United Power, Inc.        1799 Pennsylvania Street        Denver, CO 80201-0539  <b>DOCKET NO.: TSCA-08-2007-0014</b></p>	<p>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.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article (Send) <b>7005 1820 0005 4855 7544</b> <i>order</i></p>	
<p>PS Form 3811, February 2004</p>	<p>Domestic Return Receipt <span style="float: right;">102005-02-M-1540</span></p>