

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 1830 0000 5157 2281

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

12/15/09

Postmark
Here

Sent To
Street, Apt.
or PO Box
City, State

Terry Pickrell, President
 T-P Enterprises, Inc.
 7340 Utah Lane
 Colorado Springs, CO 80923

Docket No.: SDWA-08-2009-0088

PS Form

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:

DEC 16 2009

Terry Pickrell, President
 T-P Enterprises, Inc.
 7340 Utah Lane
 Colorado Springs, CO 80923

Docket No.: SDWA-08-2009-0088

A

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 ALEX L. SMITH

C. Date of Delivery
 12-17-09

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)

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102595-02-M-1540