

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

7009 3410 0000 2595 5914

Postage \$		Postmark Here 12/19/12
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total P.c.	Rick Unrein, Facility General Manager CHS, Inc. d/b/a Grainland Cooperative Holyoke Ammonia Plant P. O. Box 118/249 West Denver Street Holyoke, CO 80734	
Sent To	P. O. Box 118/249 West Denver Street Holyoke, CO 80734	
Street, Ap or PO Box	Holyoke, CO 80734	
City, State	CA 08-2013-0003	

PS Form 3800, August 2006

See Reverse for 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:

G DEC 20 2012
 Rick Unrein, Facility General Manager
 CHS, Inc. d/b/a Grainland Cooperative
 Holyoke Ammonia Plant
 P. O. Box 118/249 West Denver Street
 Holyoke, CO 80734

CA 08-2013-0003

2. Article (Trans

7009 3410 0000 2595 5914

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
 Ashley Hoxner Addressee
- B. Received by (Printed Name)
 Ashley Hoxner
- C. Date of Delivery
 12-21-12
- 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

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540