

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 5369 9810

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

Postmark  
Here

John Jacus  
 Davis Graham and Stubbs LLP  
 1550 17<sup>th</sup> Street, Suite 500  
 Denver, CO 80202  
 CAA-08-2018-0001

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

PS Form 3800, 11/15

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

John Jacus  
 Davis Graham and Stubbs LLP  
 1550 17<sup>th</sup> Street, Suite 500  
 Denver, CO 80202  
 CAA-08-2018-0001



9590 9402 3196 7166 7845 41

2. Article Number (Transfer from service label)

7012 2210 0000 5369 9810

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  
 Addressee
- B. Received by (Printed Name)  Date of Delivery
- D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Insured Mail
  - Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

Domestic Return Receipt