

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

<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; padding: 2px;">Package</td> <td style="width: 20%; padding: 2px;">\$</td> </tr> <tr> <td style="padding: 2px;">Certified Fee</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Return Receipt Fee <small>(Endorsement Required)</small></td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Restricted Delivery Fee <small>(Endorsement Required)</small></td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">Total</td> <td style="padding: 2px;">\$</td> </tr> </table>	Package	\$	Certified Fee		Return Receipt Fee <small>(Endorsement Required)</small>		Restricted Delivery Fee <small>(Endorsement Required)</small>		Total	\$	Postmark Here
Package	\$										
Certified Fee											
Return Receipt Fee <small>(Endorsement Required)</small>											
Restricted Delivery Fee <small>(Endorsement Required)</small>											
Total	\$										

Send to:
 Street or PO Box:
 City/State/Zip

Roger Freeman
Davis, Graham & Stubbs, LLP
1550 17th Street, Suite 500
Denver, CO 80202
 Docket No.: CWA-08-2009-0034

7008 3230 0003 0729 6794

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY						
<ul style="list-style-type: none"> ■ 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>X D. Kruger</i></p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p><i>D. KRUGER</i> <i>1/16/10</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>						
<p>1. Article Addressed to: <i>JAN 15 2010</i></p> <p style="margin-top: 20px;">Roger Freeman Davis, Graham & Stubbs, LLP 1550 17th Street, Suite 500 Denver, CO 80202</p> <p style="margin-top: 10px;">Docket No.: CWA-08-2009-0034</p>	<p>3. Service Type</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Certified Mail</td> <td><input type="checkbox"/> Express Mail</td> </tr> <tr> <td><input type="checkbox"/> Registered</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td><input type="checkbox"/> C.O.D.</td> </tr> </table> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	<input 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.
<input 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>2. Article Number <small>(Transfer from service label)</small></p> <p><i>(8XC) D</i></p>	<p style="text-align: center; font-size: small;">7008 3230 0003 0729 6794</p>						