CENDED	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Christopher Lovato, Owner 1150 San Juan Avenue Saguache, CO 81149	
DOCKET NO.: CWA-08-2014-0026 SEP 2 2 2014	3. Service Type Certified Mail Registered Insured Mail Return Receipt for Merchandise C.O.D.
2. A	4. Restricted Delivery? (Extra Fee) ☐ Yes
(cab)	
Domestic Retu	rn Receipt 102595-02-M-1540