

U.S. Postal Service TM
CERTIFIED MAIL TM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

7009 3410 0000 2596 2912

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

8/14/2012

Postmark
Here

William E. Zimsky, Esq.
Abadie Schill
 1099 Main Street, Suite 315
 Durango, CO 81301

DOCKET NO.: SDWA-08-2011-0079

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:

A AUG 14 2012

William E. Zimsky, Esq.
Abadie Schill
 1099 Main Street, Suite 315
 Durango, CO 81301

DOCKET NO.: SDWA-08-2011-0079

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Scott Cobby Agent
 Addressee

B. Received by (Printed Name)
 C. Date of Delivery
 8/16/12

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

2. Article Number (IT) 7009 3410 0000 2596 2912

Order

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540