

16-124
8/22/17

7008 3230 0000 1295 3678

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

Postage	\$.46
Certified Fee	3.35
Return Receipt Fee (Endorsement Required)	2.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.56

8/22/17

Postmark
Here

Sent To LAYBOURN PAULK
Street, Apt. No.,
or PO Box No. 2909 COUNTY ROAD 20 1/2
City, State, ZIP+4 LONGMONT, CO 80504

PS Form 3800, August 2006 See Reverse for Instructions

LAYBOURN PAULK
2909 COUNTY ROAD 20 1/2
LONGMONT, CO 80504

SECTION	COMPLETE THIS SECTION ON DELIVERY
3. Also complete if desired. Mark on the reverse side of the mailpiece, if required. Mark of the mailpiece, if required.	A. Signature ☒ <u>Paul K Laybourn</u> ☐ Agent ☐ Addressee
	B. Received by (Printed Name) <u>Paul K Laybourn</u> C. Date of Delivery <u>8/28/17</u>
2. Article Number (Transfer from service label)	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
	3. Service Type ☒ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
4. Restricted Delivery? (Extra Fee) ☐ Yes	
7008 3230 0000 1295 3678	

PS Form 3811, July 2013 Domestic Return Receipt

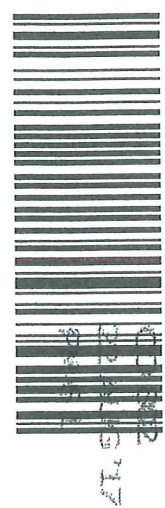
16-124
8/22/17



**Applegate
Group, Inc.**
Water Resource Advisors for the West

1490 W. 121st Avenue, Suite 100
Denver, Colorado 80234

CERTIFIED MAIL™



7008 3230 0000 1295 3692



UNITED STATES POSTAGE
PITNEY BOWES
02 1P
\$006.560
0001939588 AUG 22 2017
MAILED FROM ZIP CODE 80234

MURPHY MICHELE L
9833 SHORELINE DR
LONGMONT, CO 80504

808 SE 1 0008/30/17

RETURN TO SENDER
INSUFFICIENT ADDRESS
UNABLE TO FORWARD

BC: 80234349725 *1320-02218-22-44

0008023423437

9400921968239370

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

Postage	\$.46
Certified Fee	3.35
Return Receipt Fee (Endorsement Required)	2.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.56

8/22/17

Postmark
Here

Sent To
Michele L. Murphy
Street, Apt. No.,
or PO Box No. 9833 Shoreline Dr.
City, State, ZIP+4 Longmont, CO 80504

PS Form 3800, August 2006 See Reverse for Instructions

269E 562T 0000 0E2E 9002