COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. □ Agent Print your name and address on the reverse Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: □ Yes D. Is delivery address different from item 1? City of Golden 911 10th Street Solden, CO 80421 If YES, enter delivery address below: D No 3. Service Type Priority Mail Express® Adult Signature □ Registered Mail<sup>™</sup> Registered Mail \*\*
 Registered Mail Restricted Delivery
 Return Receipt for Merchandise Adult Signature Restricted Delivery Certified Mail® Certified Mail Restricted Delivery 9590 9402 5080 9092 2383 14 Collect on Delivery Collect on Delivery Restricted Delivery
Insured Mail □ Signature Confirmation™ 2 Article Number (Transfer from service label) Signature Confirmation Restricted Delivery 7015 0640 0006 3597 4649 Insured Mail Restricted Delivery (over \$500) PS Form 3811, July 2015 PSN 7530-02-000-9053 **Domestic Return Receipt** SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. A. Signature Print your name and address on the reverse Agent so that we can return the card to you. Addressee Attach this card to the back of the mailpiece, Beceived by (Printed Name) C. Date of Delivery or on the front if space permits. 1m 1. Article Addressed to: D. Is delivery address different from item 1? 1 Yes Sulphur Kanger District 9 Texi Mile Drive 0 Box 10 If YES, enter delivery address below: D No 3. Service Type Priority Mail Express® Adult Signature
 Adult Signature Restricted Delivery Registered Mail<sup>TM</sup>
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 Certified Mail® 9590 9402 5080 9092 2383 2 Certified Mail Restricted Delivery Collect on Delivery □ Signature Confirmation<sup>™</sup> □ Signature Confirmation Collect on Delivery Restricted Delivery 2 Article Number (Transfer from service label) nsured Mail nsured Mail Restricted Delivery 7015 0640 0006 3597 4632 Restricted Delivery over \$500) PS Form 3811, July 2015 PSN 7530-02-000-9053 **Domestic Return Receipt** 

COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Agent Print your name and address on the reverse Addressee X tolo so that we can return the card to you. C. Date of Delivery B. Received by (Printed Name) Attach this card to the back of the mailpiece, 05 15 23 ,tol.0 or on the front if space permits. D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No Denver Water 1600 W. 12th Ave. Denver, CO 80204 1. Article Addressed to: □ Priority Mail Express® 3. Service Type Priority Wall Explosion
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Article Addressed to:</li> <li>Clear Creak Rayger District 20b0 Miner Street</li> <li>Job0 Miner Street</li> <li>Idaho Springs, CO 80452</li> </ul>	A. Signature X Jarah auchin Agent B. Received by (Printed Name) Sarcufarculosski S-24-23
9590 9402 5080 9092 2383 07 2 Article Number (Transfer from service label) 7015 0640 0006 3597 4656	3. Service Type       □ Priority Mail Express®         □ Adult Signature       □ Registered Mail™         □ Adult Signature Restricted Delivery       □ Registered Mail™         □ Certified Mail®       □ Registered Mail™         □ Certified Mail       ■ Registered Mail™         □ Collect on Delivery       □ Return Receipt for Merchandise         □ Collect on Delivery       □ Signature Confirmation™         □ Insured Mail       □ Signature Confirmation         □ Nured Mail       □ Signature Confirmation         □ Restricted Delivery       □ Signature Confirmation
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt