	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	X / Addressee
	so that we can return the card to you. Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery
	or on the front if space permits.	Ty Garaner 1-18-24
	1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
	Whitewater Building Materials GRP. 940 S 10 th Street Grand Junction, CO 81501-3834	in red, sitted delivery address select.
	940 5 10th Street	
	Gard Tunction CO 81501 -3834	
	Cliara Obs. Cito Co	
		3. Service Type ☐ Priority Mail Express®
		☐ Adult Signature ☐ Registered Mail TM
	9590 9402 8303 3094 1589 90	☐ Adult Signature Restricted Delivery ☐ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™
	Article Number (Transfer from service label)	☐ Collect on Delivery ☐ Signature Confirmation ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery
	J21 1970 0002 2636 3476	☐ Insured Mail ☐ Insured Mail Restricted Delivery
	PS Form 3811, July 2020 PSN 7530-02-000-9053	(over \$500) Domestic Return Receipt
	1 5 1 5 111 5 5 1 1, 64,19 25 25 1 5 1 7 5 5 5 5 5 5 5 5 5 5 5	Bolliesto Hetalii Hessipt
		The state of the s
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
3		A. Signature
	Complete items 1, 2, and 3.Print your name and address on the reverse	☐ Agent☐ 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.	After Portertied 19107
	Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
	21 11	II TEG, Sitter delivery desired
	2815 HRd Grand Junction, Co 81504	
	2815 H M	
	Gard Tunction on 81504	
	Character 10	3. Service Type ☐ Priority Mail Express®
		☐ Adult Signature ☐ Registered Mail TM ☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted
	0500 0400 0000 0004 1500 10	Certified Mail® Certified Mail Restricted Delivery Signature Confirmation Signature Confirmation
	9590 9402 8303 3094 1590 10	☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery
	2. Article Number (Transfer from service label)	Mail Restricted Delivery
	PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt
	PS Form SO 11, July 2020 1 CN 7666 62 330 6666	
		COMPLETE THIS SECTION ON DELIVERY
	SENDER: COMPLETE THIS SECTION	
	Complete items 1, 2, and 3.	A. Signature
	Print your name and address on the reverse so that we can return the card to you.	R. Received by (Printed Name) C. Date of Delivery
	Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery
	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1? Yes
	H- 0. 1.	If YES, enter delivery address below: No
	Mesa County P.O. Box 20, 000	
	P.O. BOX 20,000	
	Grand Junctions Co 502 502	4.
	81302-302	Comico Type
		3. Service Type □ Priority Mail Express® □ Registered Mail™ □ Registered Mail™ □ Registered Mail Restricted Delivery □ Registered Mail Restricted
	0500 0400 0000 0004 4 500 00	☐ Adult Signature Restricted Delivery ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☐ Signature Confirmation Th
	9590 9402 8303 3094 1590 03	☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Restricted Delivery
	2. Article Number (Transfer from service label) 7021 1970 0002 2636 34	Mail Restricted Delivery
		Domestic Return Receipt
	PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Neturn Necelpt

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 so that we can return the card to you.	Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
M&D Enterprises 2323 River Road Grand Junction, CO 81505	3. Service Type □ Priority Mail Express®
	□ Adult Signature □ Adult Signature Restricted Delivery □ Certified Mail® □ Certified Mail Restricted Delivery □ Certified Mail Restricted Delivery □ Signature Confirmation™ □ Signature Confirmation™
9590 9402 7239 1284 0164 32	☐ Collect on Delivery ☐ Signature Confirmation ☐ Collect on Delivery Restricted Delivery Restricted Delivery
2. Article Number (<i>Transfer from service label</i>) 7021 1970 0002 2636 3339	Insured Mail Insured Mail Restricted Delivery (over \$500)
PS Form 3811, July 2020 PSN 7530-02-000-9053	Domestic Return Receipt

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