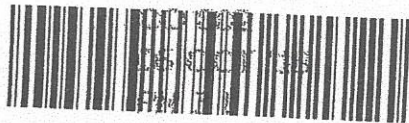


USPS TRACKING #



9590 9402 3781 8032 3201 55



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

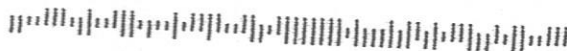
United States
Postal Service

RECEIVED
OCT 11 2018
COGCC

• Sender: Please print your name, address, and ZIP+4® in this box*

State of Colorado – COGCC
Attn: Kira Gillette
1120 Lincoln Street, Suite 801
Denver, CO 80203-2136

2018.Oct. NOAV-MIT_DANM- 10675 #401781562



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

DANMAR PRODUCTION COMPANY LLC
Attn: DANNY BAKER
3945 18th Street Lane
Greeley, CO 80634



9590 9402 3781 8032 3201 55

2. Article Number (Transfer from carrier label)

7018 0360 0000 6523 1101

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Marty Matchett 10-6-18

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input checked="" type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail (over \$500) | |