



02193247

USPS TRACKING#



9590 9403 1005 5271 8021 92



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

United States  
Postal Service

RECEIVED  
FEB 17 2016  
COGCC

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

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

WC 2193218



## 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:

WEYERMAN\* RALPH & BEVERLY  
ATTN: RALPH WEYERMAN  
PO BOX 36  
IDALIA, CO 80735



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## 2. Article Number (Transfer from service label)

7015 1520 0001 8027 7206

PS Form 3811, July 2015 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X Beverly Weyerman

☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

Beverly Weyerman

## C. Date of Delivery

2/17/16

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 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                            |   |
| <input type="checkbox"/> Insured Mail Restricted Delivery        |   |

Domestic Return Receipt