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PENALTY FOR PRIVATE USE TO VOID PAYMENT OF POSTAGE \$300

UNITED STATES POSTAL SERVICE OFFICIAL BUSINESS

SENDER INSTRUCTIONS: Print your name, address, and ZIP CODE in the space below. Complete items 1, 2, and 3 on the reverse. Fasten gummed ends and attach to front of article if space permits. Otherwise affix to back of article. Endorse article "Return Receipt Requested" adjacent to number.



(Name of Sender)

NATURAL RESOURCES
WEST (SOUTH) TEMPLE
SALT LAKE CITY, UTAH 84116

(City, State, and ZIP Code)

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE. CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

- 1. If you want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, leaving the receipt attached, and present the article at a post office service window or hand it to your rural carrier. (no extra charge)
2. If you do not want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, detach and retain the receipt, and mail the article.
3. If you want a return receipt, write the certified-mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends, if space permits. Otherwise, affix to back of article. Endorse front of article RETURN RECEIPT REQUESTED adjacent to the number.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse RESTRICTED DELIVERY on the front of the article.
5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in Item 1 of Form 3811.
6. Save this receipt and present it if you make inquiry.

No. 538596

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED - NOT FOR INTERNATIONAL MAIL (See Reverse)

SENDER: Complete items 1, 2, and 3. Add your address in the "RETURN TO" space reverse.
1. The following service is requested (check one).
[] Show to whom and date delivered.
[] Show to whom, date, and address of delivery.
[] RESTRICTED DELIVERY
[] RESTRICTED DELIVERY
2. ARTICLE ADDRESSED TO: Mr. Carl Pollastra, Soldier Creek Coal, P.O. Box 1 Price, UT 84501
3. ARTICLE DESCRIPTION: REGISTERED NO. 538596, CERTIFIED NO. 538596, INSURED NO.
I have received the article described above. SIGNATURE [] Addressee [] Authorized agent
4. DATE OF DELIVERY 2-22-80, POSTMARK FEB 22 1980
5. ADDRESS (Complete only if requested)
6. UNABLE TO DELIVER BECAUSE:

SENT TO Carl Pollastra, Soldier Creek Coal, P.O. Box 1 Price
POSTAGE \$
CONSULT POSTMASTER FOR FEES: CERTIFIED FEE, SPECIAL DELIVERY, RESTRICTED DELIVERY, SHOW TO WHOM AND DATE DELIVERED, SHOW TO WHOM, DATE, AND ADDRESS OF DELIVERY, SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY, SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY
TOTAL POSTAGE AND FEES \$
POSTMARK OR DATE ACT/007/023 2-20-80

PS Form 3811, Apr. 1977 RETURN RECEIPT REGISTERED INSURED AND CERTIFIED MAIL