File ACT/015/004

0002

P 402 459 440

RECEIPT FOR CERTIFIED MAIL

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

Sent to MR. Don Guy, Mgr. Beaver Creek Coal Co.	
Street and No. P.O. Box 1378	
P.O., State and ZIP Code Price UT 84501	
Postage	$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return Receipt Showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	$
Postmark or Date	NOV 24 1987 USPO

PS Form 3800, Feb. 1982

ACT/007/022, ACT/007/016, ACT/007/017, ACT/015/004

PS Form 3811, July 1983 447-845

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1, 2, 3 and 4.
Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.
3. Article Addressed to: Mr. Don Guy, Mgr. Beaver Creek Coal Co. Permitting & Compliance P.O. Box 1378 Price UT 84501
4. Type of Service: ☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail
Article Number P 402 459 440
Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X [signature]
6. Signature — Agent X
7. Date of Delivery NOV 25 1987
8. Addressee's Address (ONLY if requested and fee paid)

ACT/007/022, ACT/007/016, ACT/007/017, ACT/015/004

NOTE: original receipt is filed with ACT/007/022