SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

JOE CRAWFORD
UNITED STATES GYPSUM CO
560 W ADAMS ST
CHICAGO IL 60661-3676

PB 11/4/2011 S0150075

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Neil Colton ☐ Agent ☐ Addressee

B. Received by (*Printed Name*) Neil Colton
C. Date of Delivery 11-22-11

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

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (*Extra Fee*) ☐ Yes

2. Article Number
(*Transfer from service label*) 7009 3410 0001 4203 2505

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE

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

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

PENNY BERRY
STATE OF UTAH
DIVISION OF OIL GAS & MINING
PO BOX 145801
SALT LAKE CITY UT 84114-45801

7009 3410 0001 4203 2505

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

PB OFFICIAL USE

10/4/2011 $5.00

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	

Notice of File closure.

Postmark Here

Original MRRC included

Sent To

JOE CRAWFORD
UNITED STATES GYPSUM CO

Street, Apt. No. or PO Box No.

560 W ADAMS ST

City, State, ZIP

CHICAGO IL 60661-3676

PS Form 3800, August 2006

See Reverse for Instructions