 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. Article Addressed to: Roswell Field Office Bureau of Land Managemen 2909 W. Second Street 	A. Signature A. Signature A. Signature A. Signature A. Signature A. Signature A. Signature A. Agent A. Addressee B. Received by (<i>Printed Name</i>) C. Date of Delivery 14/00 D. Is delivery address different from item 17 If YES, enter delivery address below: No
Roswell, NM 88201-2019	3. Service Type Im 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) 70020510	0003 5125 1624
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

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Affidavit of
Gail MacQuesten Case 14547
Exhibit F