

No 887949

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—  
NOT FOR INTERNATIONAL MAIL

(See Reverse)

SENT TO		E/ Paso Natural Gas Co.		
STREET AND NO.		P.O. Box 990		
P.O., STATE AND ZIP CODE		Farmington, NM 87401		
POSTAGE		\$		
CONSULT POSTMASTER FOR FEES	CERTIFIED FEE	\$		
	SPECIAL DELIVERY	\$		
	RESTRICTED DELIVERY	\$		
	OPTIONAL SERVICES	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				

PS Form 3800, Apr. 1976

● SENDER: Complete items 1, 2, and 3.  
Add your address in the "RETURN TO" space on 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  
 Show to whom and date delivered. . . . . \$  
☐ RESTRICTED DELIVERY  
 Show to whom, date, and address of delivery. \$  
 (CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:  
 E/ Paso Natural Gas Co.  
 P.O. Box 990  
 Farmington, NM 87401

3. ARTICLE DESCRIPTION:  
 REGISTERED NO. | CERTIFIED NO. | INSURED NO.  
 | 887949 |  
 (Always obtain signature of addressee or agent)

I have received the article described above.  
 SIGNATURE ☐ Addressee ☒ Authorized agent

4. *Mahy D Coster*  
 DATE OF DELIVERY  
 10-10-80

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE:

CLERK'S INITIALS  
*B*

POSTMARK  
 OCT 10 1980  
 FMN NM

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