

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:

JUL 20 2011

Honorable Kelly Krakow
 Mayor, Town of Albin
 430 5th Avenue
 Albin, WY 82050

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Allian J Kriz*

- Agent
 Addressee

B. Received by (Printed Name)

Allian J Kriz

C. Date of Delivery

07/27/2011

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

F

2. Article Number

(Transfer from service label)

7009 3410 0000 2596 7283

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 •

EPA United States
 Environmental Protection Agency
 REGION 8
 1595 Wynkoop Street
 Denver, CO 80202-1129

ECEJ

AUG 02 2011

RECEIVED

SDWA 08 2011 0050

ENF-UFO Bureau *Joe Coffey (rec)*

