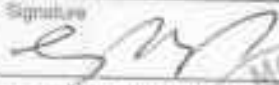


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <input checked="" type="checkbox"/> </p> <p>E. Received by (Printed Name)            GEORGE LEYS</p>
<p>1. Article Addressed to:</p> <p>Mr. George Leye, Chairman            Buffalo Valley Water District            P.O. Box 321            Moran, WY 83013</p> <p>Docket # SPWA-08-2008-0009            JAN 10 2008</p> <p>ENF-W</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below <input type="checkbox"/> No</p> <p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail    <input type="checkbox"/> Express Mail  <input checked="" type="checkbox"/> Registered    <input type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail    <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number            (Transfer from service tag)</p>	<p>7004 1350 0001 5669 7189</p>

PS Form 3811, February 2004

Domestic Return Receipt

102005-02-06 13-00