

**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 22 2008

Mr. Richard Opper, Director  
 Montana Dept. of Environ. Quality  
 1520 E. 6<sup>th</sup> Ave., P.O. Box 200901  
 Helena, MT 59620-0901

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  *Spacie Mail Services*  Agent  
 *Spacie Mail Services*  Address  
 B. Received by *Richard Opper*  Date of Delivery *7/22/08*

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 **7007 2560 0002 6445 1139**  
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102395-02-1M-15

*K. Pardee Walsh*  
*Received 7/28/08*

*Docket # SDWA-08-2008-0080*

*L*