9005	U.S. Postal Service CERTIFIED MAIL (Domestic Mail Only; No Insurance Coverage Provided)		
855	OFFICIAL (MSE)		
4	Postage	\$ 10/29/2010	
0.5	Certified Fee	0/0//	
000	Return Receipt Fee (Endorsement Required)	Postmark Here	
7005 1820	Restricted Delivery Fee (Endorsement Required)		
	Total Postage	Todd Stevens, Supervisor	
	Sent To	Orden City Water Treatment Plant	
	Street, Apt. No. or PO Box No.	133 West 29 th Street Ogden, UT 84401	
	City, State, ZIP	DOCKET NO.: CAA-08-2010-0009	
	PS Form 3800, June 201	2 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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: 	A. Signature X Addressee B. Received by (Printed Name) C. Date of Delivery Cam Morello D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Todd Stevens, Supervisor Ogden City Water Treatment Plant 133 West 29 th Street Ogden, UT 84401 DOCKET NO.: CAA-08-2010-0009	3. Service Type Certified Mail
F	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Arti 7005 1820 0005 485.	5 9005 CAIFO
PS Form 3811, February 2004 Domestic R	eturn Receipt 102595-02-M-154