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OFFICIAL USE

Postage	\$	05/01/08	Postmark Here
Certified Fee			
Return Receipt Fee (Endorsement Required)			
Restricted Delivery Fee (Endorsement Required)			

Total Post: **John Van Daveer**
 Director of Public Works
 City and County of Butte-Silver Bow
 126 W. Granite Street
 Butte, MT 59701
DOCKET NO.: CWA-08-2008-0017

PS Form 3800, August 2006 See Reverse for Instructions

7007 1490 0001 4785 6759

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ 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. <p>1. Article Addressed to: RC B</p> <p>John Van Daveer Director of Public Works City and County of Butte-Silver Bow 126 W. Granite Street Butte, MT 59701 DOCKET NO.: CWA-08-2008-0017</p>	<p>A. Signature <input checked="" type="checkbox"/> <i>Cheryl Henry</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery 5-5</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>2. Article (Tra) 7007 1490 0001 4785 6759</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input 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>

MAY 02 2008

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