

2010 SEP 20 AM 8:42

FILED
EPA REGION VIII
HEARING CLERK

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>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Kris Hughes</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><i>Kris Hughes</i></p> <p>C. Date of Delivery</p> <p><i>9-14-10</i></p>
<p>1. Article Addressed to: <i>SEP 9 2010</i></p> <p>Henry Gutz, Commissioner Daggett County P.O. Box 219 Manila, UT 84046</p> <p style="text-align: right;"><i>S</i></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p> <hr/> <p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><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 label) <i>7006 3230 0003 0729 9979</i></p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt <i>Docket # SDWA-08-2410-0078</i> 302505-02-M-1549-2410-0078</p>	