SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <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> <li>Article Addressed to:</li> </ul>	A. Signature  X
Fremont County Commissioners c/o Doug Thompson, Chair 450 North 2 <sup>nd</sup> Street, #205 Lander, WY 82520	3. Service Type  Certified Mail  Registered  Insured Mail  C.O.D.  4. Restricted Delivery? (Extra Fee)  Yes
2. Article Number (Transfer from service label)	3410 0000 2600 3553
PS Form 3811. February 2004 Domestic Return Receipt 102595-02-M-1540	