

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: *Doel SDWA 08 2008 0007*

Campbell County Commissioners
 c/o Craig G. Mader, Chair
 P.O. Box 92
 Gillette, WY 82717

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COMPLETE THIS SECTION ON DELIVERY

A. Signature * *Craig G. Mader* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

11/19/07

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