7005 1820 0005 4855 8879

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

Postage $
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees

Postmark Here

10/31/07

Sent To: Scott Garland, Attorney
Moore, Myers & Garland
Street, Apt. No. or PO Box No.: P. O. Box 8498
City, State, ZIP+4: Jackson, WY 83001

DOCKET NO.: SDWA-08-2007-0079

PS Form 3800, June 2002 See Reverse for Instructions

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:

NOV 01 2007 A

Scott Garland, Attorney
Moore, Myers & Garland
P. O. Box 8498
Jackson, WY 83001

DOCKET NO.: SDWA-08-2007-0079

RC

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name) Joe Anderson
C. Date of Delivery 11-5-07

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

JACKSON WY 83001 NOV 5 2007 UTAH POST OFFICE

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7005 1820 0005 4855 8879 Notice

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540