

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:

Docket # SPWA-08-2014-0031
AUG 20 2014

Mr. Dave Woodward, Chairman
Warm Springs Water District
P.O. Box 1390
Dubois, WY 82513

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Jane F. Graveline Agent Addressee

B. Received by (Printed Name)

Jane F. Graveline Date of Delivery

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

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)

7009 3410 0000 2598 9872