

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:
 #SDWA-08-2015-0010 APR 03 2015

Fremont County Commissioners
 Doug Thompson, Chair
 450 North 2nd Street, Room 205
 Lander, WY 82520

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee
 X Lisa Thompson

B. Received by (Printed Name)
 Lisa Thompson

C. Date of Delivery
 4-6-15

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

7008 3230 0003 0724 4979