

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-08-2014-0032

Fremont County Commissioners
Doug Thompson, Chair
450 North 2nd St., Rm 205
Lander, WY 82520

AUG 29 2014

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COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Debbie Reed*

Agent

Addressee

B. Received by (*Printed Name*)

Debbie Reed

C. Date of Delivery

9/2/14

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

2. Article Number

(*Transfer from service label*)

7009 3410 0000 2599 0007