

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: OCT 20 2010

Milward Simpson, Director
 Wyoming Department of State Parks and
 Cultural Resources
 2301 Central Avenue
 Cheyenne, WY 82002

2. Article Number
(Transfer from service label)

7005 0390 0000 4848 9175

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery
OCT 22 2010

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

UNITED STATES POSTAL SERVICE



First-Class Mail
 Postage & Fees Paid
 USPS
 Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

US EPA REGION 8
1595 Wynkoop Street
Denver, CO 80202-1129

SDWA 08 2011 0002
ENF-UFO Susan

RECEIVED
OCT 26 2010
 Office of Enforcement
 Compliance & Environmental Justice

Zbranic
(new)

POSTNET barcode