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7/21/10

Bret Wala, P. E.
 Falcon Consulting Services, LLC
 445 Sinclair Street
 Gillette, WY 82716

DOCKET NO.: SDWA-08-2010-0021

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> Charles T. Wala <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) Charles T. Wala</p> <p>C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p>Bret Wala, P. E. Falcon Consulting Services, LLC 445 Sinclair Street Gillette, WY 82716</p> <p>DOCKET NO.: SDWA-08-2010-0021 JUL 21 2010</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>2. Article No. (Transfer #)</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>7008 3230 0003 0729 5513</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>