

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.

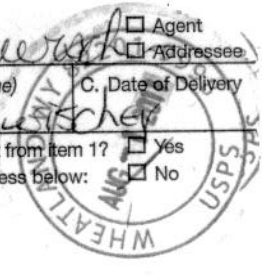
JUL 29 2011
 Platte County Commissioners
 c/o Tim Millikin, Chair
 PO Box 728
 County Courthouse
 Wheatland, WY 82201-0728

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Chris Kanwisher Addressee

B. Received by (Printed Name) C. Date of Delivery
 Chris Kanwisher

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) 08-2011-0052 7009 3410 0000 2596 7429

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 •

EPA United States
 Environmental Protection Agency
 REGION 8
 1595 Wynkoop Street
 Denver, CO 80202-1129

EMF-UFD Susan

Pardee -
 Welch
 (new)

