

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:

John Ackerman, District Chairman
 Cambria Improvement and Service District
 23303 US Highway 85
 Newcastle, WY 82701

MAR 25 2010

2. Article Number

(Transfer from service label)

7005 0390 0000 4848 7461

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *John Ackerman*

Agent

Addressee

B. Received by (Printed Name)

John Ackerman

C. Date of Delivery

3-27-10

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 WY 82701

27 MAR 2010 PM 11

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

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

MAR 30 2010

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

Office of Enforcement
 Compliance & Environment Justice

30W A08 2010 0025
ENF-UFO James

James -
Welch
(new)

