

7009 3410 0000 2598 2149

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE Extension

Postage	\$	9/24/12 Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total Postage

Rebecca L. Summerville
Datsopoulos, MacDonald, & Lind, P.E.
 Central Square Building - 201 Main Street, #201
 Missoula, MT 59802
DOCKET NO. CWA-08-2012-0025

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+

PS Form 3800, August 2006

See Reverse for Instructions

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:

Rebecca L. Summerville
 Datsopoulos, MacDonald, & Lind, P.E.
 Central Square Building - 201 Main Street, #201
 Missoula, MT 59802
DOCKET NO. CWA-08-2012-0025

E SEP 24 2012

2. Air (Tr) 7009 3410 0000 2598 2149

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 D. Rossman 9-27-12

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

Extension

Domestic Return Receipt

102595-02-M-1540