

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:

Campbell County Commissioners
 c/o Roy Edwards, Chair
 500 S. Gillette Avenue
 Gillette, WY 82716

B

MAY 20 2010

2. Article Number

(Transfer from service label)

7003 2260 0001 7779 4719

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

Agent

Addressee

B. Received by (Printed Name)

[Handwritten Name]

C. Date of Delivery

5/24/10

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

500 S. Gillette Ave. Ste.
 1100

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

RECEIVED

MAY 26 2010

Office of Enforcement
 Compliance & Environmental Justice

SDWR 082010 0044

[Handwritten Signature]

[Handwritten Signature]

