

7008 3230 0003 0727 6888

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
Order to show base

Postage \$	6/30/15 Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Paid	

Jamie Mackay, Registered Agent
Mackay Investments, LLC.
 2780 N. Moose Wilson Road
 P. O. Box 1827
 Wilson, WY 83014

DOCKET NO. SDWA-08-2013-0058

PS Form 3800, August 2006 See Reverse for Instructions

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"/> <i>Katie T</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Katie T</i></p> <p>C. Date of Delivery <i>6/30/15</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p><i>cu</i></p> <p>Jamie Mackay, Registered Agent Mackay Investments, LLC. 2780 N. Moose Wilson Road P. O. Box 1827 Wilson, WY 83014</p> <p>DOCKET NO. SDWA-08-2013-0058</p>	<p>3. Service Type <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>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article (Trace) 7008 3230 0003 0727 6888</p>	<p><i>Order</i></p>