

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:

#SDWA-08-2015-0037

SEP 29 2015

Ms. Sue Masica, Regional Director
Natl. Park Svc., Intermountain Region
12795 Alameda Parkway
Denver, CO 80225

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X *L.C. Patti* Addressee

B. Received by (Printed Name) C. Date of Delivery
L.C. Patti 1 OCT 15

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

2. Article Number
(Transfer from service label)

7009 3410 0000 2600 9043