

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. 		A. Signature <i>Susan Carnes</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <i>#SDWA-08-2015-0051</i>		B. Received by (Printed Name) <i>SUSAN CARNES</i>	C. Date of Delivery <i>10-1-15</i>
Honorable Robb Phipps Mayor, Town of Wamsutter P.O. Box 6 Wamsutter, WY 82336		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	
		<i>SEP 29 2015</i>	
2. Article Number (Transfer from service label)		7009 3410 0000 2600 9029	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	

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1. Article Addressed to: <i>#SDWA-08-2015-0051</i>		B. Received by (Printed Name) <i>Stomer</i>	C. Date of Delivery <i>10-2-15</i>
Sweetwater County Commissioners c/o Wally J. Johnson, Chairman Sweetwater County Courthouse 80 W. Flaming Gorge Way Green River, WY 82935		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	
		<i>SEP 29 2015</i>	
2. Article Number (Transfer from service label)		7009 3410 0000 2600 9036	
PS Form 3811, February 2004		Domestic Return Receipt	
		102595-02-M-1540	