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| Certified Fee                                     |    |                                                       |
| Return Receipt Fee<br>(Endorsement Required)      |    |                                                       |
| Restricted Delivery Fee<br>(Endorsement Required) |    |                                                       |
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 City, State, ZIP+4

Mr. Bryan Wilson, Attorney  
 US Department of the Interior  
 2021 14<sup>th</sup> Avenue North, Suite 112  
 Billings, MT 59101  
 RCRA-08-2015-0002

PS Form 3800, 10/2004

| SENDER: COMPLETE THIS SECTION                                                                                                                                                                                                                                                                                              | COMPLETE THIS SECTION ON DELIVERY                                                                                                                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul> | <p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>       If YES, enter delivery address below:</p> |
| <p>1. Article Addressed to:</p> <p>Mr. Bryan Wilson, Attorney<br/>         US Department of the Interior<br/>         2021 14<sup>th</sup> Avenue North, Suite 112<br/>         Billings, MT 59101<br/>         RCRA-08-2015-0002</p>                                                                                      | <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><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 Number<br/>         (Transfer from service label)</p>                                                                                                                                                                                                                                                        | <p>7012 2210 0000 5370 2206</p>                                                                                                                                                                                                                                                                                                                                                        |
| PS Form 3811, February 2004                                                                                                                                                                                                                                                                                                | Domestic Return Receipt 102595-02-M-1540                                                                                                                                                                                                                                                                                                                                               |