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

CA/FO 3/14/13

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

Postmark Here

7009 3410 0000 2595 5396

Sent To

Bob Reilly, Chief
North Routt Fire Protection District
61915 County Road 129
Clark, CO 80428
DOCKET NO.: SDWA-08-2012-0033

Street or PO

City, S

PS Form 3800, August 2006   See Reverse for Instructions

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:

Bob Reilly, Chief
North Routt Fire Protection District
61915 County Road 129
Clark, CO 80428
DOCKET NO.: SDWA-08-2012-0033

B   MAR 15 2013

2. Article Number
7009 3410 0000 2595 5396

PS Form 3811, February 2004   Domestic Return Receipt   102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X _____   ☐ Agent
☒ Addressee

B. Received by (Printed Name)   C. Date of Delivery
Bob Reilly   3-18-13

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

CA/FO