

**U.S. Postal Service™  
CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL MAIL**

7009 3410 0000 2595 5389

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

Postmark Here

Total P. **Richard Smith, Owner**  
**Lodore Supper Club and Saloon**

Sent To P. O. Box 6044

Street, Apt or PO Box Sheridan, WY 82801

City, State ZIP+4® DOCKET NO.: SDW-A-08-2012-0056

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:

**Richard Smith, Owner**  
**Lodore Supper Club and Saloon**  
P. O. Box 6044  
Sheridan, WY 82801  
DOCKET NO.: SDW-A-08-2012-0056

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*Richard Smith*

B. Received by  Printed Name  Date of Delivery  
*Richard Smith* 2012-08-28

D. Is delivery address different from item 1?  Yes  No  
If YES, enter delivery address below:

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.  
 4. Restricted Delivery? (Extra Fee)  Yes

DEC 20 2012

7009 3410 0000 2595 5389

order