

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

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OFFICIAL USE

7008 3230 0003 0729 5483

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

8/24/10

Postmark
Here

Total Postage **Robert and Janey Montanye**
Bob and Janey, LLC.
 Oasis Bar and Café
 250 Recreation Road
 Wolf Creek, MT. 59648
 DOCKET NO.: SDWA-08-2010-0014

Sent To
 Street, Apt. No.
 or PO Box No.
 City, State, Zip

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: **AUG 25 2010**

Robert and Janey Montanye
 Bob and Janey, LLC.
 Oasis Bar and Café
 250 Recreation Road
 Wolf Creek, MT. 59648
 DOCKET NO.: SDWA-08-2010-0014

B

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name)
 Robert D Montanye

C. Date of Delivery
 9/2/10

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 No. **7008 3230 0003 0729 5483**

Order #CA(F)