

**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:

CWA 07-2011-0054  
John Ellermann  
Public Works Director  
Finney County Public Works  
3100 West Maple Street  
Garden City, Kansas 67846

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 *Vernon J. Cross*  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*Vernon L. Cross* 9-26-12

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 Nu  
(Transfer f

7006 2760 0000 8645 8704

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540