

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:

**Lloyd Gossman
 Safety Coordinator
 City of Ketchikan
 334 Front Street
 Ketchikan, AK 99901**

2. Article Number
(Transfer from service label)

7010 1060 0002 0287 8006

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X **CITY OF KETCHIKAN** Agent
 Addressee

B. Received by: **334 FRONT ST.**
KETCHIKAN, AK 99901 Date of Delivery

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