

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:

ENT-W FEB 12 2008

Keith Wolff
Sam's Cafe Pryor Creek Bar
P.O. Box 247
Huntley, MT 59037

Docket # SDWA-08-2008-0017

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

Keith Wolff

C. Date of Delivery

2/20/08

D. Is delivery address different from item 1?
If YES, enter delivery address below:

☐ Yes
☐ No

3. Service Type

☒ Certified Mail
☐ Registered
☐ Insured Mail

☐ Express Mail
☐ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7004 1350 0001 5669 5338

Domestic Return Receipt

102595-02-M-1540