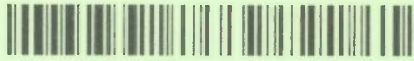


**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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 envelope.

Ms. Lynda Roark  
Executive Director  
Mountain Top Baptist Assembly  
P.O. Box 456  
Glendo, WY 82213

ASDWA-DB-2019-0010



9590 9402 3365 7227 3621 29

7012 2210 0000 5373 4313

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Marty Roark*

- Agent
- Addressee

B. Received by (Printed Name)

*Marty Roark*

C. Date of Delivery

*2/15/19*

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

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Registered Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

(over \$500)