

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: *Doc-11 SDWA-08-2007-0059*

Joseph Otte, Mayor
Town of Denton
P.O. Box 986
Denton, MT 59430

8ENF-W/SEP 27 2007

7005 1820 0005 4856 4641

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Lori Weinheimer

☒ Agent

☐ Addressee

B. Received by (Printed Name)

Lori Weinheimer

C. Date of Delivery

10-1-07

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

SEP 26 2007

102595-02-M-1540