

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:

#SDWA-08-2014-0034

SEP 05 2014

Teton County Commissioners
c/o Hank Phibbs, Chairman
P.O. Box 3594
Jackson, WY 83001

WA

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*



- Agent
- Addressee

B. Received by (Printed Name)

C O BREWSTER

C. 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

2. Article Number

(Transfer from service label)

7009 3410 0000 2596 5678