

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-08-2014-0056

OCT 01 2014

Honorable Patricia Smith
Mayor, Town of Lusk
P.O. Box 390
Lusk, WY 82225

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Linda M Fry* Agent

Addressee

B. Received by (Printed Name)

Linda M Fry

C. Date of Delivery

10/3/14

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)

7008 3230 0003 0728 4104