SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Timothy Kistler, Superintendent Peyton School District 23-Jt 13990 Bradshaw Road Peyton, CO 80831	
	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number     (Transfer from service label)	O8 3230 0003 0726 6520
PS Form 3811, February 2004 Domestic R	Return Receipt 102595-02-M-1540

