

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:
CAA-07-2007-0015

Don Willis, Director of Operations
City of Hannibal Board of Public Works
3 Industrial Loop Drive
Hannibal, Missouri 63401

2. Article Number
(Transfer from service label) **7004 2510 0006 9719 8388**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Don Willis Addressee

B. Received by (Printed Name) C. Date of Delivery
1/15/07

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