

SAVOY ENERGY

1100 16-01 16-02 + 16-03

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- 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:

John Chandler, Supervisor
 Summerfield Township
 26 Saline Street
 Petersburg, MI 49270

A. Signature

[Handwritten Signature] Agent Addressee

B. Received by (Printed Name)

Susan M. [unclear]

C. Date of Delivery

2/23/16

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below No

*P.O. Box 28
 Petersburg, MI 49270*

RECEIVED
 U.S. E.S.A.
 99270-4998
 MAY 27 11:00 AM
 PETERSBURG MI
 BOARD

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 0000 9452 2496