

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.

SEP 19 2014

1. Article Addressed to: **F**
#SDWA-08-2014-0042

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Jeanette Robertson* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
9/27/14

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

Jeanette Robertson
Beaverhead Jackson Water and/or Sewer District
P.O. Box 792
Jackson, MT 59736

Express Mail
Return Receipt for Merchandise
C.O.D.
Extra Fee) Yes

(Transfer from service label)

7009 3410 0000 2596 5920