

**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: SEP 18 2014  
 #SDWA-08-2014-0043

Ms. Nancy J. Brown, Registered Agent  
 Leisure Valley, Inc.  
 P.O. Box 299  
 Thayne, WY 83127

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Nancy Brown*  Agent  Addressee

B. Received by (Printed Name) *N. Brown* C. Date of Delivery *SEP 22 2014*

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

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) 7009 3410 0000 2596 5890