

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:

#SDWA-DB-2015-0016

The Honorable Patricia Smith, Mayor
Town of Lusk
P.O. Box 390
Lusk, WY 82225

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Linda M. Frye* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery
Linda M. Frye *6-10-15*

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

JUN 08 2015

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 0003 0724 6362