

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: **MAR 25 2016** *W.C.H.*
CWA-08-2016-0002

**Chris Kukulski, City Manager
City of Bozeman
P.O. Box 1230
Bozeman, MT 59771**

2. Article Number
(Transfer from service label)

7009 3410 0000 2600 3744

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *B.K.H.K.* Agent
 Addressee

B. Received by (Printed Name) *Brett Roth* C. Date of Delivery *3/30/16*

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