| 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 mailpiect or on the front if space permits. 1. Article Addressed to: Honorable Richard Greminger, Mayor City of Ste. Genevieve | | A. Signature X. J. | C. Date of Delivery 8-10-2009 17 |
| 165 S. 4 th Street Ste. Genevieve, MO 63670 | u. | 3. Service Type AC Certified Mall | l ipt for Merchandise |
| | | 4. Restricted Delivery? (Extra Fee) | ☐ Yes |
| Article Number (Transfer from service label) | 7004 2 | 510 000k 9725 0901 | |
| PS Form 3811, February 2004 | Domestic Retu | ım Receipt | 102595-02-M-1540 |