

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>Sam Keesh</i></p>
<p>1. Article Addressed to:</p> <p>Kenneth A. Sugden Registered Agent for Flathead Electric Cooperative, Inc. 2510 U.S. Hwy 2 East Kalispell, Montana 59901</p> <p>ENF-L SEP 25 2007</p>	<p>B. Received by (Printed Name) <input type="checkbox"/> Date of Delivery</p> <p><i>Sam Keesh</i></p>
<p>2. Article Number (Transfer from service label)</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>PS Form 3811, February 2004</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7006 3450 0002 1975 8872</p>	
<p>TSCA - 08 - 2007 - 0006 102505-02-04 1542</p>	