

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. OCT 18 2017
- 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-08-2018-0001

Ms. Dayle Felicia, Director  
Apsaalooke Water and  
Waste Water Authority  
P.O. Box 520  
Crow Agency, MT 59022 c



9590 9402 3054 7124 5872 26

2. Article Number (Transfer from service label)

**7017 1450 0002 2211 8603**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Handwritten Signature]*

Agent

Addressee

B. Received by (Printed Name)

*John Fisher*

C. Date of Delivery

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



3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                         | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise             |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. OCT 10 2017
- 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-2018-0001  
 The Honorable Alvin Not Afraid Jr.  
 Chairman  
 Crow Tribe  
 P.O. Box 159  
 Crow Agency, MT 59022



9590 9402 3054 7124 5872 02

2. Article Number (Transfer from service label)

7017 1450 0002 2211 8597

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Nancy J. H.*  Agent  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*Nancy J. H.* 10/15/17

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



3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Mail
  - Mail Restricted Delivery (over \$500)
  - Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Return Receipt for Merchandise
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery