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 mailplece, or on the front if space permits.  1. Article Addressed to:  David Hane, City Manager	A Signature  X JUNIAL Agent Agent Agent Agent Agent Addressee B. Received by (Printed Name) C. Date of Delivery PAN Li Delivery D. Is delivery address different from item 1? Yes If YES, enter delivery address below:	
City of Brookfield 116 W. Brooks Street Brookfield, Missouri 64628  2. Article Number (Transfer from service label)	3. Service Type    Cortified Mail   Express Mail     Registered   Return Receipt for Merchandise     Insured Mail   C.O.D.   Restricted Delivery? (Extra Fee)   Yes	
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