SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	D. Is delivery address different from item 1? ☐ Yes
1. Article Addressed to:  Craig Bar  Joseph Duvall, Owner 50 Craig Main Street	If YES, enter delivery address below:
Wolf Creek, MT 59648  DOCKET NO.: SDWA-08-2008-0088	3. Service Type  Certified Mall  Registered  Insured Mall  C.O.D.
RCB	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7008 05	500 0000 5595 8840
PS Form 3811, February 2004 Dome	stic Return Receipt 102595-02-M-1540