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2016 OCT 13 AM 11:26

CWA-06-2016-1761, 1763 & 1764

1766

Plaquemines Parish Government

Attorney: Tucker Henson

CWA-06-2016-1761; 1763; 1764+1766 / Complaints

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 checked="" type="checkbox"/> <i>Tucker Henson</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Cherie Hinkle</i></p> <p>C. Date of Delivery <i>10-3-16</i></p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>Mr. Phil Gioia Plaquemines Parish Government 126 Sewer Plant Road Belle Chasse, LA 70037</p> </div>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> <p style="text-align: center;">7005 1820 0003 7448 9729</p>

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540