SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY		
■ 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. 1. Article Addressed to: CAAA COOST		A. Signature X A DU DU DU DU Agent B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery D. Is delivery address different from item 1? Yes If YES, enter delivery address below:		
City Administrator City of Blair 218 South 16th Street Blair, Nebraska 68008		3. Service Tyr Cortified Registe Insured	d Mail D Express Mared D Return Re	Mait sceipt for Merchandise
Blair, Nebraska 66666		4. Restricted	Delivery? (Extra Fee)	☐ Yes
2. Article Number 7 🖂 4	5210 000P	9720 B	3419	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02				102595-02-M-1540

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