

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 mailpiece, or on the front if space permits.

1. Article Addressed to:

#SDWA-08-2014-0039 **N**

David W. Briggs, Registered Agent
Western Cooperative Company
175 S. Main St.
Torrington, WY 82240

SEP 05 2014

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Burgundy Hort Agent Addressee

B. Received by (Printed Name)

Burgundy Hort

C. Date of Delivery

9/8/14

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

PO Box 688
Torrington, WY
82240-0688

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

(Transfer from service label)

7009 3410 0000 2596 5722