

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-08-2014-0034

SEP 05 2014

Mr. Richard H. Palmer, Register Agent
Valley View Mutual Water Company
275 E. Broadway
P.O. Box 4158
Jackson, WY 83001

Handwritten initials and a large letter 'B'.

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Handwritten signature: R. Johnson

Agent
 Addressee

B. Received by (Printed Name)

Handwritten: R. Johnson

C. Date of Delivery

Handwritten: 9-9-14

D. Is delivery address different from item 1?

If YES, enter delivery address below.

Yes

No



3. Service Type

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

4. Restricted Delivery? (Extra Fee)

Yes

2. Article Number

(Transfer from service label)

7009 3410 0000 2596 5661