

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: **F** SEP 24 2014

#SDWA-08-2014-0044

Johnson County Commissioners
c/o Delbert Eitel, Chairman
76 N. Main Street
Buffalo, WY 82834

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Mary Klaahsen* Agent
 Addressee

B. Received by (*Printed Name*) *Mary Klaahsen* C. Date of Delivery *9/27/14*

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

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 2601 3576**