

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-08-2015-0009 ID

Dave Daigle, Board President
Stone Gate Estates Improvement and
Service District
P.O. Box 992
Gillette, WY 82717

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Helennan Cathey* Agent
 Addressee

B. Received by (*Printed Name*)

Helennan Cathey

C. Date of Delivery

4-6-15

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

APR 01 2015

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*)

7008 3230 0003 0724 4931