

**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:

Mike Grove, President  
Bank of the Rockies  
205 West Main  
White Sulphur Springs, MT 59545

2/19/09  
EOP-L-PL  
SDWA-08-2009-0029

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X *Chris Gorton*  Agent  
 Addressee

B. Received by (Printed Name) *Chris Gorton* C. Date of Delivery *2/24/09*

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

*PO Box 709  
White Sulphur Spgs MT  
59645-0709*

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)

7004 1350 0001 5669 8629