

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <i>X Brian Johnson</i>	<input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
1. Article Addressed to:  <div style="border: 1px solid black; padding: 5px;"> <p><b>John Herrick</b>  <b>WPC Superintendent</b>  <b>City of Pocatello Water Pollution Control Fac.</b>  <del>10733 North Rio Vista Road</del>  <b>Pocatello, ID 83201</b></p> </div>	B. Received by (Printed Name) <i>Brian Johnson</i>	C. Date of Delivery <i>4-28-14</i>
2. Article Number (Transfer from service label)	D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
	<i>PO-Box 4169</i> <i>Poc, ID 83205</i>	
	<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	III 7013 1710 10002 3980 6558 I	