SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery a 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 malipiece, or on the front if space permits.	A. Signature Agent Addressee B. Received by **Printed Name** C. Date of Delivery D. Is delivery address different from item 12 Yes
1. Article Addressed to: Thomas F. Kenneally, Regis. Agent Town Pump, Inc. P.O. Box 6000 600 S. Main Butte, MT 59701 SEP 2 3 2008	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
	Service Type Certified Mail
Docket # SOWA-08-2008-0067	4. Restricted Delivery? (Extra Fee) ☐ Yes
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