

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: *Doc ASD WA 08-2007-0054*

John Chance Houle, Chairman
Chippewa Cree Business Committee for the
Rocky Boy Utilities
PO Box 544 – Rocky Boy Route
Box Elder, MT 59521

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
X *Mario Stump* Addressee

B. Received by (Printed Name) *Mario Stump* C. Date of Delivery *10-22*

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

3. Service Type

<input 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) Yes

8ENF-W OCT 19 2007

2. Article Number *7005 0390 0000 4846 7050* *18 2007*

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540