

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:

Jackdale Delhomme, Mayor
City of Breaux Bridge
101 Berard Street
Ste. A
Breaux Bridge, LA
70517

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]* Agent
 Addressee

B. Received by (Printed Name)

Beverly C. Festine

C. Date of Delivery

8-8-14

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

3. Service Type

- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

7014 0150 0000 2453 7724

Domestic Return Receipt

102595-02-M-1540