

U.S. Postal Service™

**CERTIFIED MAIL™ RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|                                                   |    |
|---------------------------------------------------|----|
| Postage                                           | \$ |
| Certified Fee                                     |    |
| Return Receipt Fee<br>(Endorsement Required)      |    |
| Restricted Delivery Fee<br>(Endorsement Required) |    |
| Total Postage & Fees                              | \$ |

2/2/2010

Postmark  
Here

DAB

Sent To

John W MCFARLAND

Street, Apt. No.,

or PO Box No. 39341 Overlook DR

City, State, ZIP+4

Polson MT 59850-8117

PS Form 3800, June 2002

See Reverse for Instructions