

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:

Mike Boley
 Wabash Mutual Telephone Co.
 6670 Wabash Rd.
 Celina, OH 45822

2. Article Number
 (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Betsy Howe* Agent Addressee

B. Received by (Printed Name) *Betsy Howe* C. Date of Delivery *9/8/14*

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

SA MYP

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

7006 2760 0003 0766 2163