

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: ENC-L B

BOB AND TRACI BURLESON
31752 AVENIDA EVITA
SAN JUAN CAPISTRANO, CA 92675-3402

OCT 17 2007

2. Article Number
(Transfer from service label)

7006 3450 0002 1975 8957

PS Form 3811, February 2004

Domestic Return Receipt CWA 08 2007-0017 10225-02-00-000

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
X [Signature] Addressee
- B. Received by [Printed Name] C. Date of Delivery 10-29-07
BOB BURLERSON
- D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

- Service Type:
- Certified Mail
 - Registered
 - Insured Mail
 - Express Mail
 - Return Receipt for Merchandise
 - C.O.D.
4. Restricted Delivery? (Extra Fee) Yes