

ARCHER DANIE

VIC NO. 1472

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

Brian Jacobson
Bryan Cave LLP
211 North Broadway, Suite 3600
St. Louis, Missouri 63102

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

[Signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name)

[Signature] ☐ C. Date of Delivery

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



FCL20188243

☐ Registered

☐ Insured Mail

☐ Return Receipt for Merchandise

☐ C.O.D.

4. Restricted Delivery (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7008 3230 0000 9387 6507

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540