

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>Denise Weiler</i>	
1. Article Addressed to:  <p style="font-size: 2em; margin: 0;">CWA-07-2009-0074</p> Mr. Mark Rater 221 S Main St Council Bluffs, Iowa 51503	B. Received by (Printed Name) <i>Denise Weiler</i>	C. Date of Delivery <i>8/27/10</i>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
2. Article Number <small>(Transfer from service label)</small>	7006 2760 0000 8646 2855	
	PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

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<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>Emily McManis</i>	
1. Article Addressed to:  MICHAEL L COLLINS, DEVELOPER TRACEVIEW ESTATES SUBDIVISION 520 21 <sup>ST</sup> AVENUE COUNCIL BLUFFS, IOWA 51501	B. Received by (Printed Name) <i>Emily McManis</i>	C. Date of Delivery <i>8-27-10</i>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:	
2. Article Number <small>(Transfer from service label)</small>	7006 2760 0000 8646 2862	
	PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	