

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:

Mr. Marion J. Rus
 Marion J. Rus Feedlot
 3283 Dogwood Avenue
 Rock Valley, IA 51247

2. Article Number
(Transfer from service label)

7004 2510 0006 9721 5115

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Marion J. Rus Agent Addressee

B. Received by (Printed Name)

Marion J. Rus

C. Date of Delivery

*8-18-07*D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

 Yes