

## 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 mail piece, or on the back if space permits.

## 1. Article Addressed to:

Mr. Lance Robinson, President  
Micro Industries, Inc.  
200 West Second Street  
Rock Falls, IL 61071

CWA-05-2009-0003

## 2. Article Number

(Transfer from service label)

7001 0320 0006 0292 5380

## COMPLETE THIS SECTION ON DELIVERY

## A. Received by (Please Print Clearly)

SHERYL STINDT

## B. Date of Delivery

## C. Signature

X SHERYL STINDT

☐ Agent☐ Addressee

## D. Is delivery address different from item 1?

☒ Yes

If YES, enter delivery address below:

☐ No

P.O. BOX 400  
Rock Falls IL 61071-0400

## 3. Service Type

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

## 4. Restricted Delivery? (Extra Fee)

☐ Yes