

**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:

**Jared Smith  
Safety Director  
Columbia Fruit Packers, Inc.  
P.O. Box 920  
Wenatchee, WA 98807**

2. Article Number  
(Transfer from service label)

7011 0470 0002 9128 2062

PS Form 3811, July 2013

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *Jared Smith Eagle*  Agent  
 Addressee

B. Received by Printed Name *Jared Smith* C. Date of Delivery *1-17-15*

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

3. Service Type  
 Certified Mail®  Priority Mail Express™  
 Registered  Return Receipt for Merchandise  
 Insured Mail  Collect on Delivery

4. Restricted Delivery? (Extra Fee)  Yes