•	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <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  X
Article Addressed to:	D. Is delivery address different from Item 1? Yes If YES, enter delivery address below: No
CWA-07-2010-0094  David and Peg Bruce	
Bruce Feedlot	3. Service Type
37761 Highway 34	Certified Mail
Hastings, Iowa 51540	☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number 7004 2740 0000 (Transfer from s	8646 9908
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540