COMPLETE THIS SECTION <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>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> <li>Attach this card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Attach this card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Attach this card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Attach this card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Attach this card to you.</li> <li>Below you want the card to y</li></ul>		U.S. Postal Service CERTIFIED MAIL <i>Domestic Mail Only; No Insural</i> <i>For delivery information visit our we</i> <i>Postage</i> <i>Postage</i> <i>Certified Fee</i> <i>Return Receipt Fee</i> <i>Secont City, Kansas 67871</i> <i>Sir, or PO Box No.</i> <i>City, State, ZiPt-4</i> <i>PS Form 3800, June 2002</i>	Postmark Here
(Transfer from service labe 7004 2510 0006 9720 7060	· · · · · · · · · · · · · · · · · · ·	<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> <li>Article Addressed to:</li> <li>Article Addressed to:</li> <li>Keen Brantley, Esq.</li> <li>Wallace, Brantley, Shirley</li> <li>PO Box 605</li> </ul>	A. Signature       Agent         X       Addressee         B. Received by (Printed Name)       C. Date of Delivery         LUNUR       INKS         71,2,07         D. Is delivery address different from Item 1?       Yes         if YES, enter delivery address below:       No         3. Service Type       Express Mail         Registered       Return Receipt for Merchandise         Insured Mail       C.O.D.
PS FORD SX LL February 2010 Domestic Return Receipt 109505 00 M (540.)		(Transfer from service labe 7004 2510	

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