

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:

CWA-07-2008-0065+0066
Mr. Alan Brunsvold
Site Manager
Randall Transit Mix Co.
1343 Highway 105
Northwood, IA 50459

2. Article Number
(Transfer from service label)

7006 2760 0000 8652 3686

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Brenda Brunsvold Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
7-7-08

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

Domestic Return Receipt

102595-02-M-1540