SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X A. Algent Addressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery
1. Article Addressed to:	
Nick Broemeling Primeland Cooperatives	
1200 Snake River Ave. Lewiston, ID 83501	3. Service Type Certified Mail Registered Registered Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number (Transfer from service label)	3 1710 0002 3980 6602
PS Form 3811, February 2004 Domestic F	Return Receipt 102595-02-M-154