

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-07-2007-0061
 Ken Humphries
 Director of Safety
 Schilli Corporation/Truck Transport
 16136 Highway 61 North
 St Genevieve, Missouri 63670

2. Article Number
(Transfer from s _____)

7004 2510 0006 9720 3488

COMPLETE THIS SECTION ON DELIVERY**A. Signature**

Shawn Wheeler Agent
 Addressee

B. Received by (Printed Name)*Shawn Wheeler***C. Date of Delivery***12-27-07*

- 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