

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:

West Plains
FIFRA-07-2008-0009
Mr. Lonnie Calhoon
614 N. Washington
P.O. Box 328
Springfield, Missouri 65801

2. Article Number

(Transfer from service label)

7004 2510 0006 9720 3631

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x Carol Desch

- Agent
- Addressee

B. Received by (Printed Name)

Carol Desch

C. Date of Delivery

1-29-8

D. Is delivery address different from Item 1?

- Yes
- No

If YES, enter delivery address below:



3. Service Type

- Certified Mail
- Express Mail
- Registered
- Return Receipt for Merchandise
- Insured Mail
- C.O.D.

4. Restricted Delivery? (Extra Fee)

- Yes