

**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.

**Colonel Robyn M. Burk, USAF**  
**Commander, 611th Air Support Group**  
**611ASG/CC**  
**9480 Pease Avenue, Suite 123**  
**Joint Base Elmendorf-Richardson, AK 99506-2101**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 *Nequai Takai*  Agent  
 Addressee

B. Received by (Printed Name) C. Date of Delivery  
*NEQUAI TAKAI* *1-4-13*

D. Is delivery address different from Item 1?  Yes  
delivery address below:  No

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

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number  
(Transfer from service label) **11 7011 2970 0000 0880 8980 11**