**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:

Bernard A. Schlifke, Registered Agent for,
EMCO Chemical Distributors, Inc.
One IBM Plaza, No. 3000
Chicago, IL 60611

***COMPLETE THIS SECTION ON DELIVERY***

A. Received by *(Please Print Clearly)*

B. Date of Delivery 3/30

C. Signature

X D Cairns

☐ Agent
☐ Addressee

D. Is d... ry address different from item 1? ☐ Yes
nter delivery address below: ☐ No

☑ ...rtified Mail ☐ Express Mail
☐ Registered ☑ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. ...
*(... service label)* 7001 0320 0006 1448 3045

PS Form 3811, March 2001 Domestic Return Receipt 102595-01-M-1424