

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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OFFICIAL USE

7006 2760 0000 8648 7056

| | | |
|---|----|--|
| Postage | \$ | |
| Certified Fee | | |
| Return Receipt Fee (Endorsement Fee) | | |

Restr (Endor): Dennis Collins
19842 Memory Lane
Total Council Bluffs, Iowa 51503

Sent To _____
Street, A., _____
or PO Box No. _____
City, State, ZIP+4 _____

PS Form 3800, August 2006

See Reverse for Instructions