COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete PAULA NEWBROUGH Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse ELEFT AND MAIL DIVISION Addressee so that we can return the card to you. B. Respired by (Renned Names 503 15 Date of Delivery Attach this card to the back of the mailpiece, 24 2011 2 or on the front if space permits. D. Is delivery address different from item 1? Yes 1. Article Addressed to: O No If YES, enter delivery address below: WA-07-2011-0004 **RICHARD MULL** Service Type IOWA DEPARTMENT OF JUSTICE Certified Mail Express Mail **1305 E WALNUT STREET** TRegistered Return Receipt for Merchandise DES MOINES, IOWA 50319 Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes 2. Article Numt 7006 2760 0000 8645 3181 (Transfer froi PS Form 3811, February 2004 102595-02-M-164 **Domestic Return Receipt** SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete A. Signature item 4 if Restricted Delivery is desired. Agent D Print your name and address on the reverse C Addressee so that we can return the card to you. B. Received by (Printed Name) Attach this card to the back of the mailpiece, C. Date of Delivery 74 or on the front if space permits. 3 D. Is delivery address different from item 1? D Yes 1. Article Addressed to: If YES, enter delivery address below: 🗆 No CWA-07-2011-0004 CHARLES F BECKER BELIN MCCORMICK PC Service Type З. 666 WALNUT STREET, SUITE 2000 Certified Mail Express Mail D Registered Return Receipt for Merchandise DES MOINES, IOWA 50309 Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) C Yes 2. Article 7006 2760 0000 8645 3167 (Transfe PS Form 3811, February 2004 **Domestic Return Receipt** 102505-02-M-1540