

| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
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| <ul style="list-style-type: none"> ■ 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. | <p>A. Signature x Heidi Hilgerson <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery x Heidi Hilgerson 1-7-11</p> |
| <p>1. Article Addressed to:</p> <p style="font-size: 1.5em; font-weight: bold;">CAA-07-2010-0035</p> <p>Chris Schmitt, Operations Manager Fauser Oil Co., Inc. 280 North West Street Postville, Iowa 52162</p> | <p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p style="font-size: 1.2em;">PO Box 460 Postville IA 52162</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> |
| <p>2. Article Number (Transfer from service label)</p> | <p style="font-size: 1.2em; font-weight: bold;">7006 2760 0000 8645 2863</p> |