	THE PARTY OF THE P
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. Article Addressed to: 	A. Stonature Agent Addressee B. Received by (Printed Name) Vaccy Letervary D. Is delivery address different from item 1? Yes
#SDWA-08-2016-0027 William A. Field, Registered Agent	If YES, enter delivery address below:
Wilson Hardware, Inc. P.O. Box 397 Wilson, WY 83014	3. Service Type Certified Mail Express Mail Registered Receipt for Merchandise
•	☐ Insured Mail ☐ C.O.D.
G SEP 2 0 2016	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7012 (Transfer from service label)	2210 0000 5367 7382
PS Form 3811, February 2004 Domestic Retu	urn Receipt