SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery Is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
1. Article Addressed to:	D. Is delivery address different from item 1?  Yes If YES, enter delivery address below: No
F1FRA-07-2010-0007  Mr. Jeff Buresh, Owner/Manager	
Bio-Mass Renewable Tech, Inc. 1101 Pacific Street P.O. Box 242 Ladora, Iowa 52251	3. Service Type Certified Mail Registered Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number 700L 27L0 0000 (Transfer from :	8647 6937
PS Form 3811, February 2004 Domestic Re	eturn Receipt 192596-02-M-1640

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