

SENDER: COMPLETE THIS SECTION

- 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.

1. Article Addressed to:

CWA-07-2010-0127

Farmers Union Coop Supply
1615 N 6th Street
Beatrice, Nebraska 68310

2. Article Number
(Transfer from _____)

7006 2760 0000 8646 9946

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Jamie Weber

- Agent
 Addressee

B. Received by (Printed Name)

Jamie Weber

C. Date of Delivery

8/23/10

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

*PO Box 624
Beatrice NE 68310-0624*

3. Service Type

- Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes