

**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:

**Susan R. Wilson**  
**Attorney at Law, PLLC**  
**208 South Main Street, Suite 2**  
**Moscow, ID 83843**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
*[Signature]*  Addressee

B. Received by (Printed Name) C. Date of Delivery  
*ROBIE L. PAMAN* *3/18/14*

D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No

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

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number  
(Transfer from service label)

7012 3460 0001 6397 4487