

*SMITH FARM*      *CUA 0802*

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <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>	<p>A. Signature: <i>[Signature]</i>      <input checked="" type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name): <i>Alfred Smith</i>      C. Date of Delivery: <i>10-6-10</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <i>[Address]</i>      <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Lajuana S. Wilcher          English, Lucas, Priest &amp; Owsley          1101 College Street          P.O. Box 770          Bowling Green, KY 42102</p>	<p>3. Service Type</p> <p><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="text-align: center;">7009 3680 0000 5219 4633</p>
<p>PS Form 3811, August 2001      Domestic Return Receipt      2ACPR1-03-P-4061</p>	

*SMITH FARM*      *CUA NO. 08-02*

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <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>	<p>A. Signature: <i>[Signature]</i>      <input type="checkbox"/> Agent  <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name): <i>Justin Reed</i>      C. Date of Delivery: <i>10/21/10</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <i>[Address]</i>      <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Lajuana S. Wilcher          English, Lucas, Priest &amp; Owsley          1101 College Street          P.O. Box 770          Bowling Green, KY 42102</p>	<p>3. Service Type</p> <p><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="text-align: center;">[Blacked out]</p>
<p>PS Form 3811, August 2001      Domestic Return Receipt      2ACPR1-03-P-4061</p>	