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COMPLETE THIS SECTION ON DELIVERY ENDER: COMPLETE THIS SECTION A Signature Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☐ Agent Addressee_ Print your name and address on the reverse Received by (Printed Name) C. Date of Delivery 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. D. Is delivery address different from item 1? If YES, enter delivery address below: Article Addressed to: MAY 08 2014 Mr. Brent Berg, Acting President 3. Service Type Cameco Resources ☐ Express Mail ☐ Certified Mail ☐ Return Receipt for Merchandise 2020 Carey Ave., Ste 600 ☐ Registered Cheyenne, WY 82001 ☐ C.O.D. ☐ Insured Mail Restricted Delivery? (Extra Fee) ☐ Yes

Domestic Return Receipt

. Article Number

(Transfer from service label)

S Form 3811, February 2004

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