

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:

JUL 01 2014

Randall Spencer, Certified Operator
3100 Basin St.
Cheyenne, WY 82009

D

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Randall Spencer*

Agent

Addressee

B. Received by (Printed Name)

RANDALL SPENCER

C. Date of Delivery

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

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

JUL 08 2014

2. Article Number

(Transfer from service label)

7009 3410 0000 2601 3392

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

SDWA-08-2014-0020