SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature X Agent Addresse B. Received by (Printed Name) C. Date of Deliver D. Is delivery address different from Item 1? Yes If YES, enter delivery address below:
Carla D. Nissen, Owner	3. Service Type
Indian Country Mini Mart	ertified Mail Express Mail
20330 US 75 Highway	☐ Registered ☐ Return Receipt for Merchandis ☐ Insured Mail ☐ C.O.D.
Haltan Vanna 66426	
Holton, Kansas 66436	4. Restricted Delivery? (Extra Fee)