■ 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: Mr. Loren Taylor, Advisor Sargent Pipe Company, Inc. P.O. Box 627 Broken Bow, NE 68822 2. Article Number (Transfer from service label) PS Form 3811, February 2004	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
1. Article Addressed to: If YES, enter delivery address below: Image: No Mr. Loren Taylor, Advisor Sargent Pipe Company, Inc. Image: Service Type P.O. Box 627 Broken Bow, NE 68822 Image: Service Type Image: Service Bow, NE 68822 Image: Service Bow Image: Service Bow, NE 68822 Image: Service Bow Image: Service Bow, NE 68822 Image: Service Bow Image: Service Bow Image: Service Bow	 item 4 if Restricted Delivery is desired. Print your name and address on the reso that we can return the card to you. Attach this card to the back of the main 	X-1 at at a x y b d x Z Agent averse Addressee B. Received by (Printed Name) C. Date of Delivery Natalie Peynolds X/6-/0
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