

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:

**Mr. Robert Brown
General Counsel
Rhodes International
14702 Karcher Rd.
Caldwell, ID 83607**

2. Article Number

(Transfer from service)

7010 1060 0002 0288 3055

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Ellen Thomason*

- Agent
- Addressee

B. Received by (Printed Name)

Ellen Thomason

C. Date of Delivery

4/25/12

D. Is delivery address different from item 1?

Yes

If YES, enter delivery address below:

No

3. Service Type

- Certified Mail
- Express Mail
- Registered
- Return Receipt for Merchandise
- Insured Mail
- C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

Domestic Return Receipt

102595-02-M-1540