COMPLETE T''IS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete A. Signature C Agent item 4 if Restricted Delivery is desired. Х NO Addressee Print your name and address on the reverse so that we can return the card to you. В. C. Date of Delivery ed by (Printed Name) Attach this card to the back of the mailpiece, or on the front if space permits. C Yes om item 1? D 1. Article Addressed to: enter deliver. ddress below: John W. North 110 Concord Carl Junction, MO 64834 3. Service Type Certified Mail Express Mail Re: Provino Really, et al ACA- 07-2007- 6623 Heturn Receipt for Merchandise Registered Insured Mail C.O.D. μώΔ 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number and the second start Surgeria . (Transfer from service label) Second St. Hollow PS Form 3811, August 2001 Domestic Return Receipt 102595-02-M-1540 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION A. Signature Complete items 1, 2, and 3. Also complete Acent item 4 if Restricted Delivery is desired. ☐ Addressee Print your name and address on the reverse so that we can return the card to you. eceived by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece. 11-30-07 NOPT or on the front if space permits. D. Is delivery address different from item 1? 
Yes 1. Article Addressed to: 🗆 No If YES, enter delivery address below: 95 4450 Rd John W. North 216 E. 12th Street Picher, OK 74360 14333 3. Service Type Certified Mail Express Mail Re: Provenion Realty, etc D Return Receipt for Merchandise Registered Insured Mail 🗖 C.O.D. TUCA- 07-2007-0023 4. Restricted Delivery? (Extra Fee) MOR □ Yes 2. Article Number 7007 1490 0004 0114 5414 (Transfer from service label) PS Form 3811, February 2004 **Domestic Return Receipt** 102595-02-M-1540