SENDER: COMPLETE THIS	SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. item 4 if Restricted Delivery Print your name and address so that we can return the call Attach this card to the back or on the front if space pernol. Article Addressed to: Autoch Addressed to:	is desired. s on the reverse ard to you. of the mailpiece, nits.	A Signature X Agent Addressee B Received by (Rrinted Name) C. Date of Delivery 4 - 8 - 11 D Is delivery address different from item 17 Yes If YES, enter delivery address below: On the second of the second
JOREX Properties, LL P.O. Box 1176 Independence, Kansas	.c Y	3. Service Type To Certified Mail Express Mail Registered Return Receipt for Merchandise C.O.D.
		4. Restricted Delivery? (Extra Fee)
Article 7006 27	'60 0000 8645	3358
S Form 3811, February 2004	Domestic Return	n Receipt 102595-02-M-1540