

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: **2008 OCT 6 AM 10:45**

Mr. Keith D. White
White Sanitation, Inc.
21529 Double Arch Rd
Stanton, IL 62088-4325
CWA-05-2008-0006

2. Article Number
(Transfer from service label) || **7004 2510 0001 9556 1542** |

PS Form 3811, March 2001

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **Kim Hoppie** B. Date of Delivery **10/2/08**

C. Signature **X Hoppie** Agent Addressee

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

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

102595-01-M-1424