

7004 2510 0006 9718 3063

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$		Postmark
Certified Fee		
Return Receipt Fee <small>(Endorsement Required)</small>		

Re: (Enc) Robert R. Otte
 Morrow Poppe Otte Watermeier
 and Phillips PC

Tot

Sent Box 83439
 Street Lincoln, Nebraska 68501
 or PO Box No.
 City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

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:
 CWA-07-2006-0179
 Poole Feedlot

Robert R. Otte
 Morrow Poppe Otte Watermeier
 and Phillips PC
 Box 83439
 Lincoln, Nebraska 68501

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Barbara C Chmelka Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 Barbara C Chmelka 9-5-06

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

2. Article Number
 (Transfer from service label) 7004 2510 0006 9718 3063

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540